LAC+USC MEDICAL CENTER

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						BLUE CROSS Advantage)		LINA Advantage)	MO (Cal Med	LINA iConnect)		CARE iConnect)		CARE ered CA)		PLINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
	EXCISION OF CYST,	Consider Description	0.1.0000	11010	. acmey	1101000101101	. admity	1101000101101	. admity	1101000101101	. admity	1101000101101	. acmey	1 To Tooliona.	. acmey	1101000101101	. admity	. admey
	FIBROADENOMA, OR OTHER BENIGN OR					see footnote												
19120		PRIMARY PROCEDURE	19120		\$ 3,785.18		\$ 3,785.18	not contracted	\$ 3,785.18	not contracted	\$ 3,785.18	not contracted	\$ 3,785.18	not contracted	\$ 3,785.18	not contracted	\$ 3,785.18	\$ 3,785.18
		LEVEL IV. CLIBCICAL																
		LEVEL IV - SURGICAL PATHOLOGY, GROSS				see footnote												
		AND MICROSCOPIC EX	88305		\$ 59.57	****	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	\$ 59.57
		INJECTION, CEFAZOLIN SODIUM,				see footnote												
		500 MG	J0690		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, DEXAMETHASONE																
		SODIUM PHOSPHATE,				see footnote												
		1 MG	J1100		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, MIDAZOLAM																
		HYDROCHLORIDE, PER				see footnote												
		1 MG	J2250		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, ONDANSETRON																
		HYDROCHLORIDE, PER				see footnote												
		1 MG INJECTION,	J2405		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		PROPOFOL, 10 MG	J2704		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, FENTANYL				see footnote												
		CITRATE, 0.1 MG	J3010		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		RINGERS LACTATE																
		INFUSION, UP TO 1000 CC	J7120		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	ARTHROSCOPY,				Ÿ		Y	not contracted	Υ		*		Y	or contracted	Ÿ	not contracted	Y	*
	SHOULDER, SURGICAL;																	
	DECOMPRESSION OF					see footnote												
29826	SUBAC	PRIMARY PROCEDURE	29826		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		ARTHROSCOPY,																
		SHOULDER,																
		SURGICAL; WITH ROTATOR CUFF REPA	29827		\$ 7,508.22	see footnote	\$ 7,508.22	not contracted	\$ 7,508.22	not contracted	\$ 7,508.22	not contracted	\$ 7,508.22	not contracted	\$ 7,508.22	not contracted	\$ 7,508.22	\$ 7,508.22
		ANCHOR/SCREW FOR	23021		7 7,508.22		7 7,308.22	not contracted	7,500.22	not contracted	7 7,300.22	not contracted	7 7,500.22	not contracted	7 7,500.22	not contracted	7 7,300.22	7 7,300.22
		OPPOSING BONE-TO-				see feets - t-												
		BONE OR SOFT TISSUE- T	C1713		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION,				_					-							
		CEFAZOLIN SODIUM, 500 MG	J0690		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION,	30000				7	not contracted	7	not contracted	*	not contracted	7	not contracted		not contracted		7
		MIDAZOLAM				000 f												
		HYDROCHLORIDE, PER 1 MG	J2250		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -

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MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						HEM BLUE CRO dicare Advantag			LINA Advantage)		MOLINA ⁄lediConnect)	(0	L.A. (Cal Medi	CARE Connect)		CARE red CA)		OLINA ered CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facility	** Profes	sional	Facility**	Professional***	Facility**	Professional***	Facilit	ity**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		INJECTION, ONDANSETRON HYDROCHLORIDE, PER 1 MG	J2405		Ś	see -	footnote ****	\$ -	not contracted	Ś	not contracte	d \$	_	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, PROPOFOL, 10 MG	J2704		Ś	see	footnote ****	ė					_							\$ -
		INJECTION, ROPIVACAINE HYDROCHLORIDE, 1 MG	J2704 J2795		\$	see	footnote ****	\$ -	not contracted		not contracte not contracte		-	not contracted	*	not contracted		not contracted		\$ -
		INJECTION, FENTANYL CITRATE, 0.1 MG RINGERS LACTATE	J3010		\$	see -	footnote ****	\$ -	not contracted	\$	not contracte	d \$	-	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INFUSION, UP TO 1000 CC	J7120		\$	see -	footnote ****	\$ -	not contracted	\$	not contracte	d \$	-	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	ARTHROSCOPY, KNEE, SURGICAL; WITH MENISCECTOMY (MEDIAL	PRIMARY PROCEDURE	29881		\$ 3.3	see 94.67	footnote ****	\$ 3,394.67	not contracted	\$ 3,394	.67 not contracte	d \$ 3.	3,394.67	not contracted	\$ 3,394.67	not contracted	\$ 3,394.67	' not contracted	\$ 3,394.67	\$ 3,394.67
		ANESTHESIA FOR OPEN OR SURGICAL ARTHROSCOPIC PROCEDURES	01400		\$		footnote ****	\$ -	not contracted	,	not contracte		_	not contracted		not contracted		not contracted		\$ -
		INJECTION, CEFAZOLIN SODIUM, 500 MG	J0690		\$	see -	footnote ****	\$ -	not contracted	\$	not contracte	d \$	-	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, DEXAMETHASONE SODIUM PHOSPHATE, 1 MG	J1100		\$	see -	footnote ****	\$ -	not contracted	\$	not contracte	d \$	-	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, HYDROMORPHONE, UP TO 4 MG	J1170		\$	see -	footnote ****	\$ -	not contracted	\$	not contracte	d \$	-	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, KETOROLAC TROMETHAMINE, PER 15 MG	J1885		Ś	see -	footnote ****	\$ -	not contracted	Ś	not contracte	d s	_	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, MIDAZOLAM HYDROCHLORIDE, PER 1 MG			\$	see -	footnote ****	\$ -	not contracted		not contracte		-	not contracted		not contracted		not contracted		\$ -
		INJECTION, ONDANSETRON HYDROCHLORIDE, PER 1 MG	J2405		\$	see -	footnote ****	\$ -	not contracted	\$	not contracte	d \$	-	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, FENTANYL CITRATE, 0.1 MG	J3010		\$	see -	footnote ****	\$ -	not contracted	\$	not contracte	d \$	-	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

							UE CROSS dvantage)		LINA Advantage)	MO (Cal Med	LINA iConnect)		CARE diConnect)		A. CARE vered CA)		OLINA ered CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facili	ty**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		RINGERS LACTATE INFUSION, UP TO					see footnote												
		1000 CC	J7120		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	l \$ -	\$ -
	TONSILLECTOMY AND ADENOIDECTOMY;																		
42820	YOUNGER THAN AGE	PRIMARY PROCEDURE	42820		\$ 6	,096.51	see footnote ****	\$ 6,096.51	not contracted	\$ 6,096.51	not contracted	\$ 6,096.51	not contracted	\$ 6,096.5	1 not contracted	\$ 6,096.51	not contracted	\$ 6,096.51	\$ 6,096.51
12020		ANESTHESIA FOR INTRAORAL PROCEDURES, INCLUDING BIOPSY;	00170		, o	,030.31	see footnote	\$ -			not contracted		not contracted		not contracted		not contracted		\$ 0,030.31
		INCLUDING BIOPST,	00170		ş	-		· -	not contracted	ў -	not contracted	· -	not contracted	Ş -	not contracted	ş -	not contracted	i	ş -
		PATHOLOGY, GROSS AND MICROSCOPIC E	88304		Ś	59.57	see footnote	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.5	7 not contracted	\$ 59.57	not contracted	I \$ 59.57	\$ 59.57
		INJECTION, DEXAMETHASONE SODIUM PHOSPHATE,	86304		,	33.37	see footnote	33.37	not contracted	33.37	not contracted	<i>\$ 35.31</i>	not contracted	, J 33.3	7 Hot contracted	<i>y</i> 35.37	not contracted	, y 35.37	J 33.31
		1 MG	J1100		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, MORPHINE SULFATE, UP TO 10 MG	J2270		\$	-	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	1 \$ -	\$ -
		INJECTION, MORPHINE SULFATE, PRESERVATIVE-FREE					see footnote												
		FOR EPID	J2274		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, ONDANSETRON HYDROCHLORIDE, PER					see footnote												
		1 MG	J2405		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, METOCLOPRAMIDE HCL, UP TO 10 MG	J2765		\$	-	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	I \$ -	\$ -
		INFUSION, NORMAL SALINE SOLUTION,					see footnote												
		1000 CC INFUSION, NORMAL SALINE SOLUTION,	J7030		\$	-	**** see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	I \$ -	\$ -
		250 CC	J7050		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		ALBUTEROL, INHALATION SOLUTION, FDA- APPROVED FINAL PROD	J7613		Ś		see footnote	\$ -	not contracted	¢	not contracted	ć	not contracted	ć	not contracted	ć	not contracted	l \$ -	ć
43235	ESOPHAGOGASTROD UODENOSCOPY, FLEXIBLE, TRANSORAL: DIAGNO	PRIMARY PROCEDURE	43235			969.93	see footnote	\$ 969.93					not contracted						\$ 969.93

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MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						HEM BLUE CROSS licare Advantage)		OLINA e Advantage)		LINA liConnect)		CARE liConnect)		CARE red CA)		DLINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facility	** Professiona	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
0000	octive datagoty	INJECTION, MIDAZOLAM HYDROCHLORIDE, PER 1 MG			\$	see footn	·	not contracted		not contracted		not contracted			\$ -	not contracted		\$ -
		INJECTION, FENTANYL CITRATE, 0.1 MG	J3010		\$	see footn	** \$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	ESOPHAGOGASTROD UODENOSCOPY, FLEXIBLE, TRANSORAL; WITH B	PRIMARY PROCEDURE	43239		\$ 9	see footn	ote ** \$ 969.93	not contracted	\$ 969.93	not contracted	\$ 969.93	not contracted	\$ 969.93	not contracted	\$ 969.93	not contracted	\$ 969.93	\$ 969.93
		LEVEL IV - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EX	88305		\$	see footn	ote ** \$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	\$ 59.57
		INJECTION, MIDAZOLAM HYDROCHLORIDE, PER 1 MG	J2250		\$	see footn	ote ** \$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, FENTANYL CITRATE, 0.1 MG	J3010		\$	see footn	ote ** \$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	COLONOSCOPY, FLEXIBLE; DIAGNOSTIC, INCLUDING					see footn												
45378	COLLECTION	PRIMARY PROCEDURE INJECTION, MIDAZOLAM HYDROCHLORIDE, PER 1 MG			\$ 9	see footn	** \$ 951.26	not contracted		not contracted		not contracted		not contracted		not contracted		\$ 951.26
		INJECTION, FENTANYL CITRATE, 0.1 MG	J3010		\$	see footn	ote ** \$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	COLONOSCOPY, FLEXIBLE; WITH BIOPSY, SINGLE OR MULTIPLE	PRIMARY PROCEDURE	45380		\$ 1,2	see footn	ote ** \$ 1,243.02	2 not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	\$ 1,243.02
		LEVEL IV - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EX				see footn	, -,-,-,-,-			not contracted								\$ 59.57
		INJECTION, MIDAZOLAM HYDROCHLORIDE, PER 1 MG			\$	see footn	ote ** \$ -	not contracted	\$ -	not contracted	\$ -	not contracted		not contracted		not contracted		\$ -
		INJECTION, FENTANYL CITRATE, 0.1 MG	J3010		\$	see footn	ote ** \$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						1 BLUE CROSS re Advantage)		LINA Advantage)		LINA liConnect)		CARE iConnect)		CARE red CA)		LINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
45385	COLONOSCOPY, FLEXIBLE; WITH REMOVAL OF TUMOR(S), POLYP(PRIMARY PROCEDURE	45385		\$ 1,243.0	see footnote	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	\$ 1,243.02
		COLONOSCOPY, FLEXIBLE; WITH BIOPSY, SINGLE OR MULTIPLE	45380		\$ 1,243.0	see footnote	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	\$ 1,243.02
		LEVEL IV - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EX	88305		\$ 59.5	see footnote	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	\$ 59.57
		INJECTION, MIDAZOLAM HYDROCHLORIDE, PER 1 MG	J2250		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, FENTANYL CITRATE, 0.1 MG	J3010		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
45391	COLONOSCOPY, FLEXIBLE; WITH ENDOSCOPIC ULTRASOUND EXAMI	PRIMARY PROCEDURE	45391		\$ 1,243.0	see footnote	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	\$ 1,243.02
		COLONOSCOPY, FLEXIBLE; WITH BIOPSY, SINGLE OR MULTIPLE	45380		\$ 1,243.0	see footnote	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	\$ 1,243.02
		COMBINED ENDOSCOPIC CATHETERIZATION OF THE BILIARY AND	74330		\$ -	see footnote	\$ -	not contracted	,	not contracted	. ,	not contracted		not contracted		not contracted		s -
		LEVEL IV - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EX	88305		\$ 59.5	see footnote	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	\$ 59.57
		INJECTION, SUCCINYLCHOLINE CHLORIDE, UP TO 20 MG	J0330		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, ONDANSETRON HYDROCHLORIDE, PER 1 MG	J2405		\$ -	see footnote	\$ -	not contracted		not contracted		not contracted		not contracted		not contracted	*	\$ -
		INJECTION, PROPOFOL, 10 MG INJECTION,	J2704		\$ -	see footnote	\$ -	not contracted		not contracted		not contracted		not contracted		not contracted	\$ -	\$ -
		METOCLOPRAMIDE HCL, UP TO 10 MG INJECTION, FENTANYL	J2765		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		CITRATE, 0.1 MG	J3010		\$ -	see rootnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						LUE CROSS Advantage)		LINA Advantage)	MO (Cal Med	LINA iConnect)		CARE liConnect)		CARE red CA)		DLINA ered CA)	Maximum Negotiated Rate		nimum iated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Fac	cility**
	LAPAROSCOPY,																		
47563	SURGICAL; CHOLECYSTECTOMY	PRIMARY PROCEDURE	47562		\$ 6,065.32	see footnote	\$ 6,065.32	not contracted	\$ 6,065.32	not contracted	\$ 6,065.32	not contracted	\$ 6,065.32	not contracted	\$ 6,065.32	not contracted	\$ 6,065.32	Ś	6,065.32
4/302	CHOLECTSTECTOWN	ANESTHESIA FOR	4/302		\$ 6,065.32		\$ 6,065.32	not contracted	\$ 6,065.32	not contracted	\$ 6,065.32	not contracted	\$ 6,065.32	not contracted	\$ 6,065.32	not contracted	\$ 6,065.32	, ş	0,005.32
		INTRAPERITONEAL																	
		PROCEDURES IN				see footnote													
		UPPER ABDO	00790		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$	-
		LEVEL III - SURGICAL																	
		PATHOLOGY, GROSS				see footnote													
		AND MICROSCOPIC E	88304		\$ 59.57	****	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	\$	59.57
		INJECTION, CEFOXITIN				see footnote													
		SODIUM, 1 GM	J0694		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$	-
		INJECTION,							•		•				•				
		DEXAMETHASONE																	
		SODIUM PHOSPHATE, 1 MG	J1100		\$ -	see footnote ****	\$ -	not contracted	¢ .	not contracted	\$ -	not contracted	¢ .	not contracted	\$ -	not contracted	\$ -	\$	_
		INJECTION,	31100		y		J.	not contracted	,	not contracted	ý.	not contracted	Ÿ	not contracted	7	not contracted	Ţ	7	
		HYDROMORPHONE,				see footnote													
		UP TO 4 MG	J1170		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$	-
		INJECTION, MIDAZOLAM																	
		HYDROCHLORIDE, PER				see footnote													
		1 MG	J2250		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$	-
		INJECTION,																	
		ONDANSETRON HYDROCHLORIDE, PER				see footnote													
		1 MG	J2405		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$	-
		INJECTION,							•		•				•				
		NEOSTIGMINE																	
		METHYLSULFATE, UP TO 0.5 MG	J2710		, .	see footnote	¢ -	not contracted	¢ .	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	<u>.</u>	¢	_
		10 0.5 1410	32710		,		J.	not contracted	7	not contracted	ý.	not contracted	7	not contracted	7	not contracted	7	7	
		INJECTION, FENTANYL				see footnote													
		CITRATE, 0.1 MG RINGERS LACTATE	J3010		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$	-
		INFUSION, UP TO				see footnote													
		1000 CC	J7120		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$	-
		GLYCOPYRROLATE,																	
		INHALATION																	
		SOLUTION, COMPOUNDED				see footnote													
		PRODUCT	J7642		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$	-
	REPAIR INITIAL																		
	INGUINAL HERNIA,					and factor - t -													
49505	AGE 5 YEARS OR OLDER; R	PRIMARY PROCEDURE	49505		\$ 3,813.76	see footnote ****	\$ 3,813.76	not contracted	\$ 3,813.76	not contracted	\$ 3,813.76	not contracted	\$ 3,813.76	not contracted	\$ 3,813.76	not contracted	\$ 3,813.76	\$ \$	3,813.76
45505		ANESTHESIA FOR	.5505		y 3,013.70		y 3,013.70	not contracted	y 3,013.70	not contracted	÷ 3,013.70	not contracted	y 3,613.70	not contracted	y 3,013.70	not contracted	y 5,015.70	7	3,013.70
		HERNIA REPAIRS IN																	
		LOWER ABDOMEN;	00030		ć	see footnote ****	ć	not oc interest	ć	not continue t	ć	not occition of		not or its t	ć	not or returned		_ ا	
	ļ	NOT OTH	00830		> -	****	\$ -	not contracted	> -	not contracted	\$ -	not contracted	> -	not contracted	> -	not contracted	> -	\$	-

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

					BLUE CROSS e Advantage)		LINA Advantage)		LINA liConnect)		CARE diConnect)		CARE red CA)		DLINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
	LEVEL II - SURGICAL																
	PATHOLOGY, GROSS				see footnote												
	AND MICROSCOPIC EX	88302		\$ 29.6	1 ****	\$ 29.61	not contracted	\$ 29.61	not contracted	\$ 29.61	not contracted	\$ 29.61	not contracted	\$ 29.61	not contracted	\$ 29.61	\$ 29.61
					see footnote												
	MESH (IMPLANTABLE)	C1781		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	INJECTION,																
	CEFAZOLIN SODIUM, 500 MG	J0690		\$ -	see footnote ****	ć	not contracted	خ	not contracted	\$ -	not contracted	\$ -	not contracted	ė	not contracted	ė	\$ -
	INJECTION,	10690		Ş -		> -	not contracted	\$ -	not contracted	Ş -	not contracted	Ş -	not contracted	-	not contracted	\$ -	\$ -
	DEXAMETHASONE																
	SODIUM PHOSPHATE,				see footnote												
	1 MG	J1100		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	INJECTION,																
	HYDROMORPHONE,				see footnote												
	UP TO 4 MG	J1170		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	INJECTION, KETOROLAC																
	TROMETHAMINE, PER				see footnote												
	15 MG	J1885		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	INJECTION,			,		,		,						,			,
	MIDAZOLAM																
	HYDROCHLORIDE, PER				see footnote												
	1 MG	J2250		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	INJECTION, ONDANSETRON																
	HYDROCHLORIDE, PER				see footnote												
	1 MG	J2405		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	INJECTION,			,		,		,						,			,
	NEOSTIGMINE																
	METHYLSULFATE, UP				see footnote												
	TO 0.5 MG	J2710		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	INJECTION, FENTANYL				see footnote												
	CITRATE, 0.1 MG	J3010		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	RINGERS LACTATE	33010		7		7	not contracted	7	not contracted	7	not contracted	7	not contracted	-	not contracted	,	7
	INFUSION, UP TO				see footnote												
	1000 CC	J7120		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	GLYCOPYRROLATE,																
	INHALATION																
	SOLUTION,				f												
	COMPOUNDED PRODUCT	J7642		\$ -	see footnote ****	ė .	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	FRODUCI	37042		, -	+	· -	not contracted	· -	not contracted	- ب	not contracted	- ب	not contracted	· -	not contracted	- ب	· -
BIOPSY, PROSTATE;																	
NEEDLE OR PUNCH,					see footnote												
55700 SINGLE OR MULTIPL		55700		\$ 2,146.2	9 ****	\$ 2,146.29	not contracted	\$ 2,146.29	not contracted	\$ 2,146.29	not contracted	\$ 2,146.29	not contracted	\$ 2,146.29	not contracted	\$ 2,146.29	\$ 2,146.29
	OFFICE OR OTHER																
	OUTPATIENT VISIT																
	FOR THE EVALUATION				see footnote ****	<u></u>		<u></u>				, .		^		ć	ć
	AND	99214		Ş -	****	> -	not contracted	\$ -	not contracted	- ۲	not contracted	β -	not contracted	> -	not contracted	> -	> -

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MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

					ANTHEM B		_	LINA Advantage)		LINA iConnect)		CARE liConnect)		CARE red CA)	-	OLINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary																		
Code	Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		LEVEL IV - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EX	88305		\$ 59.57	see footnote ****	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	\$ 59.57
		INJECTION, GARAMYCIN, GENTAMICIN, UP TO 80 MG	J1580		\$ -	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, LIDOCAINE HCL FOR INTRAVENOUS INFUSION, 10 M	J2001		\$ -	see footnote ****	\$ -	not contracted		not contracted		not contracted		not contracted		not contracted	·	\$ -
62322	INJECTION(S), OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S)	PRIMARY PROCEDURE	62322		\$ 761.17	see footnote ****	\$ 761.17	not contracted	\$ 761.17	not contracted	\$ 761.17	not contracted	\$ 761.17	not contracted	\$ 761.17	not contracted	\$ 761.17	\$ 761.17
		DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JO	64635		\$ 2,104.81	see footnote ****	\$ 2,104.81	not contracted	\$ 2,104.81	not contracted	\$ 2,104.81	not contracted	\$ 2,104.81	not contracted	\$ 2,104.81	not contracted	\$ 2,104.81	\$ 2,104.81
		INJECTION, METHYLPREDNISOLO NE ACETATE, 80 MG	J1040		\$ -	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, BUPIVICAINE HYDROCHLORIDE, 30 ML	\$0020		not available	not available	not available	not contracted	not available	not contracted	not available	not contracted	not available	not contracted	not available	not contracted	not available	not available
62323	INJECTION(S), OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S)	PRIMARY PROCEDURE	62323		\$ 761.17	see footnote	\$ 761.17			not contracted								
	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; TRANS	PRIMARY PROCEDURE	64483		\$ 986.76	see footnote	\$ 986.76			not contracted								
04483	Thans	INJECTION(S), ANESTHETIC AGENT(S) AND/OR STEROID; TRANS	64484		\$ 980.70	see footnote	\$ 980.70											\$ 980.70
		FLUOROSCOPY (SEPARATE PROCEDURE), UP TO 1 HOUR PHYSICIA	76000		\$ -	see footnote	\$ -	not contracted		not contracted		not contracted		not contracted		not contracted		
66821	DISCISSION OF SECONDARY MEMBRANOUS CATARACT (OPACIFIED	PRIMARY PROCEDURE	66821		\$ 603.26	see footnote ****	\$ 603.26											

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						LUE CROSS Advantage)		LINA Advantage)		LINA iConnect)		CARE diConnect)		CARE red CA)		DLINA ered CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code Service Cat	tegory Service Description	CPT Code	Note	Facil	ity**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
EXTRACAPSUL CATARACT RE WITH INSERTI	LAR MOVAL ION OF					see footnote	·		,		,		,		,		,	,
66984 INTRAO	PRIMARY PROCEDURE ANESTHESIA FOR PROCEDURES ON EYE;			\$ 2	2,489.25	**** see footnote	\$ 2,489.25	not contracted	\$ 2,489.25	not contracted	\$ 2,489.25	not contracted	\$ 2,489.25	not contracted	\$ 2,489.25	not contracted	\$ 2,489.25	\$ 2,489.25
	LENS SURGERY INJECTION, MIDAZOLAM HYDROCHLORIDE, PER			\$	-	**** see footnote	\$ -	not contracted		not contracted		not contracted		not contracted	\$ -	not contracted		\$ -
	1 MG INJECTION, FENTANYL			\$	-	**** see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	CITRATE, 0.1 MG RINGERS LACTATE INFUSION, UP TO	J3010		\$	-	**** see footnote	\$ -	not contracted		not contracted		not contracted			\$ -	not contracted		\$ -
	1000 CC POSTERIOR CHAMBER			\$	-	see footnote	<u>\$</u> -	not contracted		not contracted		not contracted		not contracted	_	not contracted		\$ -
COMPUTED TOMOGRAPH' OR BRAIN; WI	ITHOUT	V2632		\$	-	see footnote		not contracted		not contracted		not contracted		not contracted		not contracted		\$ -
70450 CONTRAST MA	A PRIMARY PROCEDURE OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND			\$	130.50	see footnote	\$ 130.50 \$ -	not contracted		not contracted		not contracted		not contracted	\$ 130.50 \$ -	not contracted		\$ 130.50
	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDI	70551		\$	275.82	see footnote	\$ 275.82	not contracted	·	not contracted					\$ 275.82			\$ 275.82
MAGNETIC RESONANCE (I PROTON) IMA 70553 BRAIN (INCLUI	AGING,	70553		ς	441.42	see footnote	\$ 441.42	not contracted	\$ 441.42	not contracted	\$ 441.42	not contracted	\$ 441.42	not contracted	\$ 441.42	not contracted	\$ 441.42	\$ 441.42
, ossa simila (liaceo)	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITHO	74183		Ś	441.42	see footnote	\$ 441.42	not contracted		not contracted				not contracted				\$ 441.42
	INJECTION, GADOTERATE MEGLUMINE, 0.1 ML	A9575		\$	-	see footnote	\$ -	not contracted		not contracted		not contracted	\$ -	not contracted	\$ -	not contracted		\$ -
MAGNETIC RESONANCE (I PROTON) IMA 72148 SPINAL CANAL	AGING,	72148		\$	275.82	see footnote	\$ 275.82	not contracted	\$ 275.82	not contracted	\$ 275.82	not contracted	\$ 275.82	not contracted	\$ 275.82	not contracted	\$ 275.82	\$ 275.82

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MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						BLUE CROSS Advantage)		DLINA Advantage)	MO (Cal Med	LINA iConnect)		CARE liConnect)		CARE red CA)		LINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary																		
Code	Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
	MAGNETIC RESONANCE (EG,																	
	PROTON) IMAGING,					see footnote												
73721	ANY JOINT OF L	PRIMARY PROCEDURE	73721		\$ 275.82	****	\$ 275.82	not contracted	\$ 275.82	not contracted	\$ 275.82	not contracted	\$ 275.82	not contracted	\$ 275.82	not contracted	\$ 275.82	\$ 275.82
		OFFICE OR OTHER																
		OUTPATIENT VISIT																
		FOR THE EVALUATION AND	99213		ė	see footnote	ė	not contracted	ė	not contracted	\$ -	not contracted	\$ -	not contracted	¢	not contracted	خ	ć
	ULTRASOUND,	AND	33213		÷ -		ў -	not contracted	, -	not contracted	-	not contracted	· -	not contracted	? -	not contracted	· -	ş -
	ABDOMINAL, REAL																	
	TIME WITH IMAGE					see footnote												
76700	DOCUMENTATI	PRIMARY PROCEDURE	76700		\$ 130.50	****	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	\$ 130.50
	ULTRASOUND,																	
	PREGNANT UTERUS,																	
76005	REAL TIME WITH IMAGE DOCUM	PRIMARY PROCEDURE	76805		\$ 130.50	see footnote ****	\$ 130.50	nat contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	\$ 130.50
70805	ULTRASOUND,	PRIIVIARY PROCEDURE	70803		\$ 130.50	see footnote	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	\$ 130.50
76830	TRANSVAGINAL	PRIMARY PROCEDURE	76830		\$ 130.50	****	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	\$ 130.50
		OFFICE OR OTHER																,
		OUTPATIENT VISIT																
		FOR THE EVALUATION				see footnote												
		AND	99213		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	SCREENING																	
	MAMMOGRAPHY, BILATERAL (2-VIEW					see footnote												
77067	STUDY OF EACH	PRIMARY PROCEDURE	77067		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	s -	not contracted	\$ -	not contracted	\$ -	\$ -
		OFFICE OR OTHER			Ŷ		Ť	1100 001111 00000	Ť	1101 001111 00100	Ŷ	1101 001111 00100	<u> </u>	not contracted	Y	not contracted	Ψ	Ť
		OUTPATIENT VISIT																
		FOR THE EVALUATION				see footnote												
		AND	99213		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	BASIC METABOLIC																	
	PANEL (CALCIUM, TOTAL) THIS PANEL					see footnote												
80048	•	PRIMARY PROCEDURE	80048		\$ 8.46	****	\$ 8.46	not contracted	\$ 8.46	not contracted	\$ 8.46	not contracted	\$ 8.46	not contracted	\$ 8.46	not contracted	\$ 8.46	\$ 8.46
		INJECTION, HEPARIN			7		*		*		*				*		7	7
		SODIUM, PER 1000				see footnote												
		UNITS	J1644		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION,																
		MIDAZOLAM																
		HYDROCHLORIDE, PER 1 MG	J2250		Ġ _	see footnote ****	¢	not contracted	¢ _	not contracted	Ċ _	not contracted	ر ۔	not contracted	\$ -	not contracted	٠ .	\$ -
		1 1410	12230		· -		-	not contracted	-	not contracted	-	not contracted	· -	not contracted	-	not contracted	-	· -
		INJECTION, FENTANYL				see footnote												
		CITRATE, 0.1 MG	J3010		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		BLOOD COUNT;																
		COMPLETE (CBC),																
		AUTOMATED (HGB,	05037			see footnote	A]	A 6:-		<u> </u>			1	A	l		
		HCT, RBC,	85027		\$ 6.47		\$ 6.47	not contracted	\$ 6.47	not contracted	\$ 6.47	not contracted	\$ 6.47	not contracted	\$ 6.47	not contracted	\$ 6.47	\$ 6.47
		PROTHROMBIN TIME;	85610		\$ 4.29	see footnote	\$ 4.29	not contracted	\$ 4.29	not contracted	\$ 4.29	not contracted	\$ 4.29	not contracted	\$ 4.29	not contracted	\$ 4.29	\$ 4.29
		FROTHKUIVIDIN TIME;	03010		4.29		4.29	not contracted	4.29	not contracted	4.29	not contracted	4.29	not contracted	4.29	not contracted	4.29	4.29

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						BLUE CROSS Advantage)		LINA Advantage)		LINA iConnect)		CARE diConnect)		CARE red CA)		DLINA ered CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code Se	ervice Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		COLLECTION OF VENOUS BLOOD BY VENIPUNCTURE	36415		\$ 3.00	see footnote	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	\$ 3.00
	MPREHENSIVE FABOLIC PANEL	VEINIPOINCTORE	30413		\$ 5.00	'	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 5.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	\$ 3.00
	S PANEL MUST					see footnote												
80053 INCL	LUDE T	PRIMARY PROCEDURE	80053		\$ 10.56	****	\$ 10.56	not contracted	\$ 10.56	not contracted	\$ 10.56	not contracted	\$ 10.56	not contracted	\$ 10.56	not contracted	\$ 10.56	\$ 10.56
		RADIOLOGIC EXAMINATION, CHEST; SINGLE VIEW	71045		\$ 96.96	see footnote	ć 06.06	not contracted	¢ 00.00	n at anniversal and	\$ 96.96	not controcted	¢ 05.05	not contracted	¢ 00.00	not contracted	\$ 96.96	¢ 00.00
		BLOOD COUNT; COMPLETE (CBC),	/1045		\$ 96.96		\$ 96.96	not contracted	\$ 96.96	not contracted	\$ 96.96	not contracted	\$ 96.96	not contracted	\$ 96.96	not contracted	\$ 96.96	\$ 96.96
		AUTOMATED (HGB, HCT, RBC,	85025		\$ 7.77	see footnote	\$ 7.77	not contracted	\$ 7.77	not contracted	\$ 7.77	not contracted	\$ 7.77	not contracted	\$ 7.77	not contracted	\$ 7.77	\$ 7.77
		INJECTION, DEXAMETHASONE SODIUM PHOSPHATE,				see footnote												
		1 MG INJECTION, ONDANSETRON	J1100		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		HYDROCHLORIDE, PER 1 MG	J2405		\$ -	see footnote	¢ .	not contracted	¢ .	not contracted	\$ -	not contracted	\$ -	not contracted	¢ _	not contracted	ς -	¢ .
		INJECTION, PROPOFOL, 10 MG	J2704		\$ -	see footnote	ė .	not contracted	·	not contracted		not contracted		not contracted	•	not contracted		\$ -
		·	32704		7 -		· -	not contracted	· ·	not contracted	, -	not contracted	, -	not contracted	-	not contracted	, -	- ۲
		INJECTION, FENTANYL CITRATE, 0.1 MG	J3010		\$ -	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		COLLECTION OF VENOUS BLOOD BY				see footnote												
LIPIE	D PANEL THIS	VENIPUNCTURE	36415		\$ 3.00	****	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	\$ 3.00
PAN THE	IEL MUST INCLUDE FOLLOWING:		20254		4 40 20	see footnote	42.20		42.20		42.20		40.00		4 42.20		42.20	42.20
80061 CHO	JL	PRIMARY PROCEDURE HEPATIC FUNCTION PANEL THIS PANEL	80061		\$ 13.39	1	\$ 13.39	not contracted	\$ 13.39	not contracted	\$ 13.39	not contracted	\$ 13.39	not contracted	\$ 13.39	not contracted	\$ 13.39	\$ 13.39
		MUST INCLUDE THE FOLL	80076		\$ 8.17	see footnote	\$ 8.17	not contracted	\$ 8.17	not contracted	\$ 8.17	not contracted	\$ 8.17	not contracted	\$ 8.17	not contracted	\$ 8.17	\$ 8.17
		HEMOGLOBIN; GLYCOSYLATED (A1C)	83036		\$ 9.71	see footnote	\$ 9.71	not contracted	\$ 9.71	not contracted	\$ 9.71	not contracted	\$ 9.71	not contracted	\$ 9.71	not contracted	\$ 9.71	\$ 9.71
		COLLECTION OF VENOUS BLOOD BY VENIPUNCTURE	36415		\$ 3.00	see footnote	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	\$ 3.00
STIC	NALYSIS, BY DIP CK OR TABLET GENT FOR	STOTONE	30413		y 5.00	see footnote	y 5.00	noccontracted	\$ 3.00	not contracted	3.00	not contracted	ý 3.00	not contracted	- - 5.00	not contracted	- - 3.00	÷ 5.00
81000 BILIF	RUBI	PRIMARY PROCEDURE	81000		\$ 4.02	****	\$ 4.02	not contracted	\$ 4.02	not contracted	\$ 4.02	not contracted	\$ 4.02	not contracted	\$ 4.02	not contracted	\$ 4.02	\$ 4.02

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						LUE CROSS Advantage)		LINA Advantage)		LINA iConnect)		CARE liConnect)		CARE red CA)		LINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary										- 6		- 6						
Code	Service Category URINALYSIS, BY DIP	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
	STICK OR TABLET																	
	REAGENT FOR					see footnote												
81001	BILIRUBI	PRIMARY PROCEDURE	81001		\$ 3.17	****	\$ 3.17	not contracted	\$ 3.17	not contracted	\$ 3.17	not contracted	\$ 3.17	not contracted	\$ 3.17	not contracted	\$ 3.17	\$ 3.17
	URINALYSIS, BY DIP STICK OR TABLET																	
	REAGENT FOR					see footnote												
81002	BILIRUBI	PRIMARY PROCEDURE	81002		\$ 3.48	****	\$ 3.48	not contracted	\$ 3.48	not contracted	\$ 3.48	not contracted	\$ 3.48	not contracted	\$ 3.48	not contracted	\$ 3.48	\$ 3.48
		OFFICE OR OTHER																
		OUTPATIENT VISIT FOR THE EVALUATION				see footnote												
		AND	99213		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		CYTOPATHOLOGY,			·		•								•		•	
		CERVICAL OR																
		VAGINAL (ANY REPORTING SYSTE	88175		\$ 26.61	see footnote	\$ 26.61	not contracted	\$ 26.61	not contracted	\$ 26.61	not contracted	\$ 26.61	not contracted	\$ 26.61	not contracted	\$ 26.61	\$ 26.61
		INFECTIOUS AGENT	88173		3 20.01		\$ 20.01	not contracted	3 20.01	not contracted	20.01	not contracted	3 20.01	not contracted	ÿ 20.01	not contracted	\$ 20.01	Ş 20.01
		DETECTION BY																
		NUCLEIC ACID (DNA				see footnote												
		OR RNA)	87624		\$ 35.09	****	\$ 35.09	not contracted	\$ 35.09	not contracted	\$ 35.09	not contracted	\$ 35.09	not contracted	\$ 35.09	not contracted	\$ 35.09	\$ 35.09
		CULTURE, BACTERIAL;																
		QUANTITATIVE																
		COLONY COUNT,				see footnote							1.					
		URINE URINALYSIS, BY DIP	87086		\$ 8.07	****	\$ 8.07	not contracted	\$ 8.07	not contracted	\$ 8.07	not contracted	\$ 8.07	not contracted	\$ 8.07	not contracted	\$ 8.07	\$ 8.07
		STICK OR TABLET																
		REAGENT FOR				see footnote												
		BILIRUBI	81000		\$ 4.02	****	\$ 4.02	not contracted	\$ 4.02	not contracted	\$ 4.02	not contracted	\$ 4.02	not contracted	\$ 4.02	not contracted	\$ 4.02	\$ 4.02
	URINALYSIS, BY DIP STICK OR TABLET																	
	REAGENT FOR					see footnote												
81003	BILIRUBI	PRIMARY PROCEDURE	81003		\$ 2.25	****	\$ 2.25	not contracted	\$ 2.25	not contracted	\$ 2.25	not contracted	\$ 2.25	not contracted	\$ 2.25	not contracted	\$ 2.25	\$ 2.25
		HOSPITAL																
		OUTPATIENT CLINIC																
		VISIT FOR ASSESSMENT AND				see footnote												
		MAN	G0463		\$ 142.43	****	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	\$ 142.43
		URINALYSIS, BY DIP																
		STICK OR TABLET																
		REAGENT FOR BILIRUBI	81002		\$ 3.48	see footnote	\$ 3.48	not contracted	\$ 3.48	not contracted	\$ 3.48	not contracted	\$ 3.48	not contracted	\$ 3.48	not contracted	\$ 3.48	\$ 3.48
	PROSTATE SPECIFIC	J.ZIIIODI	31002		3.40		y 3.46	not contracted	y 3.40	not contracted	y 3.46	not contracted	y 3.46	not contracted	y 3.40	not contracted	y 3.46	y 3.46
	ANTIGEN (PSA);					see footnote												
84153	TOTAL	PRIMARY PROCEDURE	84153		\$ 18.39	****	\$ 18.39	not contracted	\$ 18.39	not contracted	\$ 18.39	not contracted	\$ 18.39	not contracted	\$ 18.39	not contracted	\$ 18.39	\$ 18.39
		COLLECTION OF VENOUS BLOOD BY				see footnote												
		VENIPUNCTURE	36415		\$ 3.00	see footnote	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	\$ 3.00
	THYROID				, 5,00		, 5.00		, 5.00	222222	, 5.00		, 5.00		, 5.00	277277720000	, 5.00	1.00
_	STIMULATING					see footnote							1.					
84443	HORMONE (TSH)	PRIMARY PROCEDURE	84443		\$ 16.80	****	\$ 16.80	not contracted	\$ 16.80	not contracted	\$ 16.80	not contracted	\$ 16.80	not contracted	\$ 16.80	not contracted	\$ 16.80	\$ 16.80

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						BLUE CROSS Advantage)		LINA Advantage)	MOI (Cal Medi		L.A. (Cal Med	CARE iConnect)		CARE red CA)	MOLINA (Covered CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility** Professional***	Facility**	Facility**
	,	COLLECTION OF VENOUS BLOOD BY VENIPUNCTURE	36415		\$ 3.00	see footnote	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00 not contracte		\$ 3.00
	BLOOD COUNT; COMPLETE (CBC), AUTOMATED (HGB,	VEINI ONCIONE	30413		y 3.00	see footnote	y 3.00	not contracted	<u> </u>	not contracted	y 3.00	not contracted	у 3.00	not contracted	y 3.00 Hot contracte	, y 3.00	у 3.00
85025	HCT, RBC,	PRIMARY PROCEDURE COLLECTION OF VENOUS BLOOD BY	85025		\$ 7.77	**** see footnote	\$ 7.77	not contracted	\$ 7.77	not contracted	\$ 7.77	not contracted	\$ 7.77	not contracted	\$ 7.77 not contracte	\$ 7.77	\$ 7.77
	BLOOD COUNT; COMPLETE (CBC),	VENIPUNCTURE	36415		\$ 3.00	****	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00 not contracte	\$ 3.00	\$ 3.00
85027	AUTOMATED (HGB, HCT, RBC,	PRIMARY PROCEDURE	85027		\$ 6.47	see footnote ****	\$ 6.47	not contracted	\$ 6.47	not contracted	\$ 6.47	not contracted	\$ 6.47	not contracted	\$ 6.47 not contracte	\$ 6.47	\$ 6.47
		VENOUS BLOOD BY VENIPUNCTURE	36415		\$ 3.00	see footnote **** see footnote	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00 not contracte	\$ 3.00	\$ 3.00
85610	PROTHROMBIN TIME;	PRIMARY PROCEDURE COLLECTION OF VENOUS BLOOD BY	85610		\$ 4.29	**** see footnote	\$ 4.29	not contracted	\$ 4.29	not contracted	\$ 4.29	not contracted	\$ 4.29	not contracted	\$ 4.29 not contracte	\$ 4.29	\$ 4.29
	PSYCHOTHERAPY, 30 MINUTES WITH	VENIPUNCTURE	36415		\$ 3.00	**** see footnote	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00 not contracte	\$ 3.00	\$ 3.00
90832	PATIENT PSYCHOTHERAPY, 45 MINUTES WITH	PRIMARY PROCEDURE	90832		\$ 160.39	**** see footnote	\$ 160.39	not contracted	\$ 160.39	not contracted	\$ 160.39	not contracted	\$ 160.39	not contracted	\$ 160.39 not contracte	\$ 160.39	\$ 160.39
90834	PATIENT PSYCHOTHERAPY, 60	PRIMARY PROCEDURE	90834		\$ 160.39	****	\$ 160.39	not contracted	\$ 160.39	not contracted	\$ 160.39	not contracted	\$ 160.39	not contracted	\$ 160.39 not contracte	\$ 160.39	\$ 160.39
90837	MINUTES WITH PATIENT FAMILY	PRIMARY PROCEDURE	90837		\$ 160.39	see footnote ****	\$ 160.39	not contracted	\$ 160.39	not contracted	\$ 160.39	not contracted	\$ 160.39	not contracted	\$ 160.39 not contracte	\$ 160.39	\$ 160.39
90847	PSYCHOTHERAPY (CONJOINT PSYCHOTHERAPY) (WITH PAT	PRIMARY PROCEDURE	90847		\$ 160.39	see footnote ****	\$ 160.39	not contracted	\$ 160.39	not contracted	\$ 160.39	not contracted	\$ 160.39	not contracted	\$ 160.39 not contracte	d \$ 160.39	\$ 160.39
		FAMILY PSYCHOTHERAPY (WITHOUT THE PATIENT PRESENT), 50	90846		\$ 160.39	see footnote	\$ 160.39	not contracted	\$ 160.39	not contracted	\$ 160.39	not contracted	\$ 160.39	not contracted	\$ 160.39 not contracte	1 \$ 160.39	\$ 160.39
	GROUP PSYCHOTHERAPY (OTHER THAN OF A					see footnote											
90853	MULTIPLE-FAMILY GR ELECTROCARDIOGRA M, ROUTINE ECG	PRIMARY PROCEDURE	90853		\$ 89.69	****	\$ 89.69	not contracted	\$ 89.69	not contracted	\$ 89.69	not contracted	\$ 89.69	not contracted	\$ 89.69 not contracte	\$ 89.69	\$ 89.69
93000	WITH AT LEAST 12 LEADS;	PRIMARY PROCEDURE	93000		\$ -	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ - not contracte	\$ -	\$ -

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						ANTHEM B (Medicare A			LINA Advantage)		LINA iConnect)		CARE liConnect)		CARE red CA)		DLINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Fa	cility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND ELECTROCARDIOGRA	99214		\$	-	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		M, ROUTINE ECG WITH AT LEAST 12 LEADS;	93005		\$	66.72	see footnote ****	\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	\$ 66.72
93452	LEFT HEART CATHETERIZATION INCLUDING INTRAPROCEDURAL IN	I PRIMARY PROCEDURE	93452		\$	3,475.94	see footnote ****	\$ 3,475.94	not contracted	\$ 3,475.94	not contracted	\$ 3,475.94	not contracted	\$ 3,475.94	not contracted	\$ 3,475.94	not contracted	\$ 3,475.94	\$ 3,475.94
		BASIC METABOLIC PANEL (CALCIUM, TOTAL) THIS PANEL MUST	80048		Ś	8.46	see footnote ****	\$ 8.46	not contracted	\$ 8.46	not contracted	\$ 8.46	not contracted	\$ 8.46	not contracted	\$ 8.46	not contracted	\$ 8.46	\$ 8.46
		INJECTION, HEPARIN SODIUM, PER 1000 UNITS	J1644		\$	-	see footnote	\$ -	not contracted	\$ -	not contracted		not contracted	\$ -	not contracted		not contracted		\$ -
		INJECTION, MIDAZOLAM HYDROCHLORIDE, PER 1 MG	J2250		\$	-	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, FENTANYL CITRATE, 0.1 MG BLOOD COUNT;	J3010		\$	-	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		COMPLETE (CBC), AUTOMATED (HGB, HCT, RBC,	85027		\$	6.47	see footnote ****	\$ 6.47	not contracted	\$ 6.47	not contracted	\$ 6.47	not contracted	\$ 6.47	not contracted	\$ 6.47	not contracted	\$ 6.47	\$ 6.47
		PROTHROMBIN TIME; COLLECTION OF VENOUS BLOOD BY	85610		\$	4.29	see footnote **** see footnote	\$ 4.29	not contracted	\$ 4.29	not contracted	\$ 4.29	not contracted	\$ 4.29	not contracted	\$ 4.29	not contracted	\$ 4.29	\$ 4.29
	POLYSOMNOGRAPHY; AGE 6 YEARS OR OLDER, SLEEP	VENIPUNCTURE	36415		\$	3.00	**** see footnote	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	\$ 3.00
95810	STAGING WI	PRIMARY PROCEDURE OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION	95810		\$	1,102.82	**** see footnote	\$ 1,102.82	not contracted	\$ 1,102.82	not contracted	\$ 1,102.82	not contracted	\$ 1,102.82	not contracted	\$ 1,102.82	not contracted	\$ 1,102.82	\$ 1,102.82
	THERAPEUTIC PROCEDURE, 1 OR MORE AREAS, EACH	AND	99213		\$	-	**** see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
97110	15 MINUTES OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION	PRIMARY PROCEDURE	97110		\$	-	**** see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
99203		PRIMARY PROCEDURE	99203		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

								LINA Advantage)		LINA iConnect)		CARE liConnect)		. CARE ered CA)		DLINA ered CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
	,	DIAGNOSTIC			,		,		,		,		,		,		,	,
		MAMMOGRAPHY, INCLUDING																
		COMPUTER-AIDED				see footnote												
		DETECT	77066		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		ULTRASOUND,																
		BREAST, UNILATERAL,																
		REAL TIME WITH IMAGE DO	76641		\$ 130.50	see footnote	\$ 130.50	not contracted	ć 130.F0	not contracted	ć 120.F0	not contracted	ć 120 F0	not contracted	130.50	not contracted	ć 130.50	ć 130.F0
		CONSULTATION AND	76641		\$ 130.50		\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	\$ 130.50
		REPORT ON																
		REFERRED SLIDES PREPARED ELS	88321		\$ 40.57	see footnote ****	\$ 40.57	not contracted	\$ 40.57	not contracted	\$ 40.57	not contracted	\$ 40.57	not contracted	\$ 40.57	not contracted	\$ 40.57	\$ 40.57
	OFFICE OR OTHER	THEFARED EES	00321		3 40.57		3 40.37	not contracted	3 40.37	not contracted	\$ 40.37	not contracted	3 40.57	not contracted	3 40.57	not contracted	3 40.37	\$ 40.37
	OUTPATIENT VISIT																	
99204	FOR THE EVALUATION	PRIMARY PROCEDURE	99204		\$ -	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	OFFICE OR OTHER		33201		Ť		Ψ	not contracted	Ψ	not contracted	*	not contracted	<u> </u>		, , , , , , , , , , , , , , , , , , ,	or contracted	Ÿ	Ţ
	OUTPATIENT VISIT																	
99205	FOR THE EVALUATION AND	PRIMARY PROCEDURE	99205		\$ -	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	s -	\$ -
	OFFICE				,		•		'		•		,				,	1
	CONSULTATION FOR A NEW OR																	
	ESTABLISHED					see footnote												
	PATIENT, W	PRIMARY PROCEDURE	99243		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	OFFICE CONSULTATION FOR																	
	A NEW OR																	
	ESTABLISHED					see footnote												
	PATIENT, W INITIAL	PRIMARY PROCEDURE	99244		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	COMPREHENSIVE																	
	PREVENTIVE MEDICINE					saa faatmata												
	EVALUATION AN	PRIMARY PROCEDURE	99385		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	INITIAL																	
	COMPREHENSIVE PREVENTIVE																	
	MEDICINE					see footnote												
99386	EVALUATION AN	PRIMARY PROCEDURE	99386		\$ -	***	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	OFFICE OR OTHER OUTPATIENT VISIT																	
	FOR THE EVALUATION					see footnote												
99213	AND	PRIMARY PROCEDURE	99213		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		COMPUTED TOMOGRAPHY,																
		ABDOMEN AND																
		PELVIS; WITH	74477			see footnote												
		CONTRAST	74177		\$ 441.42	****	\$ 441.42	not contracted	\$ 441.42	not contracted	\$ 441.42	not contracted	\$ 441.42	not contracted	\$ 441.42	not contracted	\$ 441.42	\$ 441.42

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

							.UE CROSS .dvantage)		LINA Advantage)		LINA liConnect)		CARE diConnect)		CARE red CA)		LINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facili	ity**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		RADIOLOGIC EXAMINATION, PELVIS; COMPLETE, MINIMUM OF 3 RADIOLOGIC	72190		\$	130.50	see footnote	130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	\$ 130.50
		EXAMINATION; FOREARM, 2 VIEWS	73090		Ś	96.96	see footnote	96.96	not contracted	\$ 96.96	not contracted	\$ 96.96	not contracted	\$ 96.96	not contracted	\$ 96.96	not contracted	\$ 96.96	\$ 96.96
	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND	PRIMARY PROCEDURE	99212		\$	-	see footnote	} -	not contracted		not contracted		not contracted		not contracted		not contracted		\$ -
		RADIOLOGIC EXAMINATION, SPINE, LUMBOSACRAL; MINIMUM OF	72110		Ś	130.50	see footnote	130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	\$ 130.50
	HOSPITAL OUTPATIENT CLINIC VISIT FOR ASSESSMENT AND	PRIMARY PROCEDURE	G0463		*	142.43	see footnote	150.50			not contracted						not contracted		
00403	IVIAIN	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA)			Ś		see footnote					·							
		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA)	87591 87491		\$	35.09 35.09	see footnote	35.09 35.09			not contracted						not contracted		
		ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUM	76815		Ÿ	130.50	see footnote	130.50									not contracted		,
		ROUTINE OBSTETRIC CARE INCLUDING ANTEPARTUM CARE, VAGIN	59400		\$	_	see footnote												\$ -
	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION				Ÿ	-	see footnote	<u> </u>	not contracted	\$ -	not contracted	\$ -	not contracted	-	not contracted	\$ -	not contracted	, -	\$ -
	AND OPHTHALMOLOGICAL SERVICES: MEDICAL EXAMINATION AND	PRIMARY PROCEDURE	99214		\$	-	**** see footnote	5 -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
92012		PRIMARY PROCEDURE BASIC METABOLIC PANEL (CALCIUM, TOTAL) THIS PANEL MUST	92012		\$	8.46	**** ç		not contracted		not contracted	·					not contracted		

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

							LUE CROSS Advantage)		LINA Advantage)		LINA iConnect)		CARE liConnect)		CARE red CA)		DLINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Fac	ility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		BLOOD COUNT; COMPLETE (CBC), AUTOMATED (HGB, HCT, RBC,	85025		\$	7.77	see footnote ****	\$ 7.77	not contracted	\$ 7.77	not contracted	\$ 7.77	not contracted	\$ 7.77	not contracted	\$ 7.77	not contracted	\$ 7.77	\$ 7.77
		THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLO	85730		\$	6.01	see footnote ****	\$ 6.01	not contracted	\$ 6.01	not contracted	\$ 6.01	not contracted	\$ 6.01	not contracted	\$ 6.01	not contracted	\$ 6.01	\$ 6.01
		PROTHROMBIN TIME;	85610		\$	4.29	see footnote	\$ 4.29	not contracted	\$ 4.29	not contracted	\$ 4.29	not contracted	\$ 4.29	not contracted	\$ 4.29	not contracted	\$ 4.29	\$ 4.29
	OSTROT OR OTHER	COLLECTION OF VENOUS BLOOD BY VENIPUNCTURE	36415		\$	3.00	see footnote ****	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	\$ 3.00
99211	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND	I PRIMARY PROCEDURE	99211		\$	-	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
99202	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND	I PRIMARY PROCEDURE	99202		\$	-	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
99215	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND	I PRIMARY PROCEDURE	99215		\$	-	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
67028	INTRAVITREAL INJECTION OF A PHARMACOLOGIC AGENT (SEPARA	PRIMARY PROCEDURE	67028		\$	382.20	see footnote ****	\$ 382.20	not contracted	\$ 382.20	not contracted	\$ 382.20	not contracted	\$ 382.20	not contracted	\$ 382.20	not contracted	\$ 382.20	\$ 382.20
D0140	LIMITED ORAL EVALUATION - PROBLEM FOCUSED	PRIMARY PROCEDURE	D0140		\$	-	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	PERIODIC COMPREHENSIVE PREVENTIVE MEDICINE						see footnote												
99392	REEVALUATION PERIODIC COMPREHENSIVE PREVENTIVE	PRIMARY PROCEDURE	99392		\$	-	***	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
99391	MEDICINE REEVALUATION	PRIMARY PROCEDURE	99391		\$	-	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	IMMUNIZATION ADMINISTRATION (INCLUDES						see footnote												
90471	PERCUTANEOUS, INT	PRIMARY PROCEDURE OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND	90471		\$	74.32	see footnote	\$ 74.32	not contracted		not contracted		not contracted		not contracted		not contracted		\$ 74.32

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						ANTHEM B	LUE CROSS Advantage)		LINA Advantage)		LINA liConnect)		CARE liConnect)		. CARE ered CA)		DLINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Fac	ility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
	PATIENT SCREENED																		
12205	FOR DEPRESSION	PRIMARY PROCEDURE	1220F		Ś	_	see footnote ****	¢ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
1220F	(300)	OFFICE OR OTHER	1220F		Ş	-		\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		OUTPATIENT VISIT																	
		FOR THE EVALUATION	00242		Ś		see footnote								1	_			
	EXTRACTION,	AND	99213		\$	-		\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	ERUPTED TOOTH OR																		
D7140	EXPOSED ROOT	DDIA 4 DV DDOCEDUDE	D71.40			4 662 60	see footnote ****	4 4 663 60		4 4 6 6 3 6 9		4 4 552 52		4 4 662 66		4 4 662 60		4 4 662 60	4 4 662 60
D/140	(ELEVATION AN	PRIMARY PROCEDURE OFFICE OR OTHER	D7140		\$	1,662.69	***	\$ 1,662.69	not contracted	\$ 1,662.69	not contracted	\$ 1,662.69	not contracted	\$ 1,662.69	not contracted	\$ 1,662.69	not contracted	\$ 1,662.69	\$ 1,662.69
		OUTPATIENT VISIT																	
		FOR THE EVALUATION					see footnote					_			1				_
		AND	99213		\$	-	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		PANORAMIC FILM	D0330		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
							see footnote												
		LOCAL ANESTHESIA	D9215		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	TELEPHONE EVALUATION AND																		
99442	MANAGEMENT SERVICE BY A PHYSIC	PRIMARY PROCEDURE	99442		Ś	_	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	Ś -	\$ -
33442	SERVICE BY ATTITISIE	LIPID PANEL THIS	33442		7			Ÿ	not contracted	Ÿ	not contracted	Ÿ	not contracted	7	not contracted	Ÿ	not contracted	Y	7
		PANEL MUST INCLUDE																	
		THE FOLLOWING: CHOL	80061		Ś	13.39	see footnote ****	\$ 13.39	not contracted	\$ 13.39	not contracted	\$ 13.39	not contracted	\$ 13.39	not contracted	\$ 13.39	not contracted	\$ 13.39	\$ 13.39
		RENAL FUNCTION	00001		7	13.33		y 13.33	not contracted	- 13.33	not contracted	y 13.33	not contracted	ψ 13.33	not contracted	Ų 13.33	not contracted	Ų 13.33	ý 15.55
		PANEL THIS PANEL																	
		MUST INCLUDE THE FOLLOW	80069		Ś	8.68	see footnote ****	\$ 8.68	not contracted	\$ 8.68	not contracted	\$ 8.68	not contracted	\$ 8.68	not contracted	\$ 8.68	not contracted	\$ 8.68	\$ 8.68
		BLOOD COUNT;	80003		۲	8.08		\$ 8.08	not contracted	\$ 8.08	not contracted	3 8.08	not contracted	φ 8.0c	not contracted	3 8.08	not contracted	3 8.08	\$ 8.08
		COMPLETE (CBC),																	
		AUTOMATED (HGB, HCT, RBC,	85027		Ś	6.47	see footnote	\$ 6.47	not contracted	\$ 6.47	not contracted	\$ 6.47	not contracted	\$ 6.47	not contracted	\$ 6.47	not contracted	\$ 6.47	\$ 6.47
		nci, kbc,	63027		Ş	0.47		\$ 6.47	not contracted	\$ 6.47	not contracted	\$ 6.47	not contracted	\$ 0.47	not contracted	\$ 6.47	not contracted	\$ 6.47	\$ 6.47
		HEMOGLOBIN;					see footnote												
		GLYCOSYLATED (A1C)	83036		\$	9.71	****	\$ 9.71	not contracted	\$ 9.71	not contracted	\$ 9.71	not contracted	\$ 9.71	not contracted	\$ 9.71	not contracted	\$ 9.71	\$ 9.71
		ALBUMIN; URINE (EG,																	
		MICROALBUMIN),					see footnote												
		QUANTITATIVE	82043		\$	5.78	****	\$ 5.78	not contracted	\$ 5.78	not contracted	\$ 5.78	not contracted	\$ 5.78	not contracted	\$ 5.78	not contracted	\$ 5.78	\$ 5.78
		CREATINE	82540		Ś	4.64	see footnote ****	\$ 4.64	not contracted	\$ 4.64	not contracted	\$ 4.64	not contracted	\$ 4.64	not contracted	\$ 4.64	not contracted	\$ 4.64	\$ 4.64
		COLLECTION OF	32340		7	4.04		7 7.04	not contracted	7 7.04	not contracted	7 7.04	not contracted	7 7.04	not contracted	7 7.04	not contracted	7 7.04	7 4.04
		VENOUS BLOOD BY					see footnote												
	POSTOPERATIVE	VENIPUNCTURE	36415		\$	3.00	****	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	\$ 3.00
	FOLLOW-UP VISIT,																		
	NORMALLY INCLUDED						see footnote			4						,			
99024	IN THE	PRIMARY PROCEDURE	99024		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	Ş -

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						/I BLUE CROSS re Advantage)	_	DLINA Advantage)	_	LINA liConnect)		CARE liConnect)		CARE red CA)		DLINA ered CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary					,	1	,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	,	1	(33	1	,,,,,		,,,,	1		
Code	Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		DIAGNOSTIC																
		MAMMOGRAPHY,																
		INCLUDING																
		COMPUTER-AIDED	77065		ς .	see footnote			<u> </u>		<u></u>		_		<u></u>		1 5 -	
		DETECT	77065		\$ -		\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	1 \$ -	\$ -
		ULTRASOUND,																
		BREAST, UNILATERAL,																
		REAL TIME WITH				see footnote	2											
		IMAGE DO	76642		\$ 96	96 ****	\$ 96.96	not contracted	\$ 96.96	not contracted	\$ 96.96	not contracted	\$ 96.96	not contracted	\$ 96.96	not contracted	\$ 96.96	\$ 96.96
	SCANNING COMPUTERIZED																	
	OPHTHALMIC																	
	DIAGNOSTIC					see footnote												
92134	IMAGING, PO	PRIMARY PROCEDURE	92134		\$ 66.		\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	\$ 66.72
	OPHTHALMOLOGICAL																	
	SERVICES: MEDICAL					6												
92014	EXAMINATION AND	PRIMARY PROCEDURE	92014		\$ 142.	see footnote	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	\$ 142.43
32014	L V/ (L	INTRAVITREAL	32014		7 142	15	7 142.43	not contracted	ÿ 142.43	not contracted	ÿ 142.43	not contracted	ÿ 142.43	not contracted	7 142.43	not contracted	7 142.43	ÿ 142.43
		INJECTION OF A																
		PHARMACOLOGIC				see footnote	:											
		AGENT (SEPARA	67028		\$ 382	20 ****	\$ 382.20	not contracted	\$ 382.20	not contracted	\$ 382.20	not contracted	\$ 382.20	not contracted	\$ 382.20	not contracted	\$ 382.20	\$ 382.20
	TELEBLIONE																	
	TELEPHONE EVALUATION AND																	
	MANAGEMENT					see footnote	,											
99441	SERVICE BY A PHYSIC	PRIMARY PROCEDURE	99441		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	ı ş -	\$ -
	PERIODIC																	
	COMPREHENSIVE																	
	PREVENTIVE																	
00202	MEDICINE REEVALUATION	PRIMARY PROCEDURE	99393		ς .	see footnote	: : \$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	4	not contracted	d \$ -	\$ -
33393	ABDOMINAL	FRIIVIANT PROCEDURE	22323		٠			not contracted		not contracted	· -	not contracted	- ب	not contracted		not contracted	- -	- ب
	PARACENTESIS																	
	(DIAGNOSTIC OR					see footnote	:											
49083	THERAPEUTIC); WIT	PRIMARY PROCEDURE	49083		\$ 969	93 ****	\$ 969.93	not contracted	\$ 969.93	not contracted	\$ 969.93	not contracted	\$ 969.93	not contracted	\$ 969.93	not contracted	\$ 969.93	\$ 969.93
Ī		OFFICE OR OTHER																
I		OUTPATIENT VISIT				san fant												
		FOR THE EVALUATION AND	99213		Ś.	see footnote		not contracted	\$ -	not contracted	Ś -	not contracted	\$ -	not contracted	\$ -	not contracted	d \$ -	\$ -
	PERIODIC	7.110	33213		,		7 -	not contracted		not contracted	,	not contracted	-	not contracted	7 -	not contracted	. , ,	- ·
I	COMPREHENSIVE																	
	PREVENTIVE																	
I	MEDICINE				1.	see footnote												
99394	REEVALUATION	PRIMARY PROCEDURE	99394		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	1 \$ -	\$ -
	SARS-COV-2 COVID-19 AMP PRB HIGH					con factor - t-												
HUUUS	THROUGHPUT TECH	PRIMARY PROCEDURE	U0003		\$ 75.	see footnote	\$ 75.00	not contracted	\$ 75.00	not contracted	\$ 75.00	not contracted	\$ 75.00	not contracted	\$ 75.00	not contracted	\$ 75.00	\$ 75.00
00003	INKUUUNPUI IECH	PRIIVIART PRUCEDURE	00003		/5.	JU "****	/5.00	not contracted	/5.00	not contracted	75.00 د	not contracted	/5.00	not contracted	/5.00	not contracted	/5.00 د پر	/5.00

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						M BLUE CROSS re Advantage)		LINA Advantage)		LINA iConnect)		CARE liConnect)		CARE red CA)		LINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		COV-19 AMP PRB HGH THRUPUT WITHIN 2 DAYS COLLECT	U0005		\$ 25.	see footnote	\$ 25.00		\$ 25.00	not contracted			\$ 25.00				,	\$ 25.00
	CHEMOTHERAPY ADMINISTRATION, INTRAVENOUS					see footnote												
	INFUSION TECHN	PRIMARY PROCEDURE	96413		\$ 382.		\$ 382.20	not contracted	\$ 382.20	not contracted	\$ 382.20	not contracted	\$ 382.20	not contracted	\$ 382.20	not contracted	\$ 382.20	\$ 382.20
		OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND	99214		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
99381	INITIAL COMPREHENSIVE PREVENTIVE MEDICINE EVALUATION AN	PRIMARY PROCEDURE	99381		\$ -	see footnote ***	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	TELEPHONE EVALUATION AND MANAGEMENT SERVICE BY A PHYSIC	PRIMARY PROCEDURE	99443		4	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	DOPPLER ECHOCARDIOGRAPHY, FETAL, PULSED WAVE		33110		<u> </u>	see footnote	<u> </u>	not some acces	<u> </u>			not some detect		not contracted		not contracted		
	AND/OR CON CYSTOURETHROSCOP	PRIMARY PROCEDURE	76827		\$ 130		\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	\$ 130.50
52000	Y (SEPARATE PROCEDURE)	PRIMARY PROCEDURE	52000		\$ 689	see footnote	\$ 689.62	not contracted	\$ 689.62	not contracted	\$ 689.62	not contracted	\$ 689.62	not contracted	\$ 689.62	not contracted	\$ 689.62	\$ 689.62
		BLADDER IRRIGATION, SIMPLE, LAVAGE AND/OR				see footnote												
		INSTILLATION PROSTATE SPECIFIC ANTIGEN (PSA);	51700		\$ 318	see footnote	\$ 318.98	not contracted	\$ 318.98	not contracted	\$ 318.98	not contracted	\$ 318.98	not contracted	\$ 318.98	not contracted	\$ 318.98	\$ 318.98
		TOTAL	84153		\$ 18.		\$ 18.39	not contracted	\$ 18.39	not contracted	\$ 18.39	not contracted	\$ 18.39	not contracted	\$ 18.39	not contracted	\$ 18.39	\$ 18.39
		PROSTATE SPECIFIC ANTIGEN (PSA); FREE	84154		\$ 18.	see footnote	\$ 18.39	not contracted	\$ 18.39	not contracted	\$ 18.39	not contracted	\$ 18.39	not contracted	1 \$ 18.39	not contracted	\$ 18.39	\$ 18.39
		OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND	99212		\$ -	see footnote	\$ -	not contracted		not contracted		not contracted		not contracted		not contracted		\$ -
		CYTOPATHOLOGY, SELECTIVE CELLULAR ENHANCEMENT TECHNIQUE	88112		\$ 59.	see footnote	\$ 59.57											*

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MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						HEM BLUE CROS	-	_	LINA Advantage)	_	LINA liConnect)		CARE liConnect)		CARE ered CA)	_	DLINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary																			
Code	Service Category	Service Description	CPT Code	Note	Facility'	** Profes	ional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		PROSTATE SPECIFIC ANTIGEN (PSA);																	
		COMPLEXED (DIRECT				see	ootnote												
		MEAS	84152		\$:	18.39	****	\$ 18.39	not contracted	\$ 18.39	not contracted	\$ 18.39	not contracted	\$ 18.39	not contracted	\$ 18.39	not contracted	\$ 18.39	\$ 18.39
		URINALYSIS, BY DIP																	
		STICK OR TABLET REAGENT FOR					ootnote												
		BILIRUBI	81001		\$	3.17	****	\$ 3.17	not contracted	\$ 3.17	not contracted	\$ 3.17	not contracted	\$ 3.17	not contracted	\$ 3.17	not contracted	\$ 3.17	\$ 3.17
		COLLECTION OF			Ý	5.17		ψ 5127	not contracted	ψ 5.1.7	not contracted	ψ 5.1 <i>7</i>		ψ 5.1.7	inot contracted	ψ 3.1 <i>7</i>	not contracted	ý 5.1 <i>7</i>	ψ 5127
		VENOUS BLOOD BY					ootnote												
	V461141 5151 B	VENIPUNCTURE	36415		\$	3.00	****	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	\$ 3.00
	VISUAL FIELD EXAMINATION,																		
	UNILATERAL OR					see	ootnote												
92083	BILATERAL, WITH	PRIMARY PROCEDURE	92083		\$ 13	35.16	****	\$ 135.16	not contracted	\$ 135.16	not contracted	\$ 135.16	not contracted	\$ 135.16	not contracted	\$ 135.16	not contracted	\$ 135.16	\$ 135.16
	TREATMENT OF																		
	EXTENSIVE OR PROGRESSIVE					500	ootnote												
67228	RETINOPATHY (EG,	PRIMARY PROCEDURE	67228		\$ 60	33.26	****	\$ 603.26	not contracted	\$ 603.26	not contracted	\$ 603.26	not contracted	\$ 603.26	not contracted	\$ 603.26	not contracted	\$ 603.26	\$ 603.26
	, ,							,						,					
	ECHOCARDIOGRAPHY,	,																	
	TRANSTHORACIC, REAL-TIME WITH						ootnote												
93306	IMAGE D	PRIMARY PROCEDURE	93306		\$ 51	79.20	****	\$ 579.20	not contracted	\$ 579.20	not contracted	\$ 579.20	not contracted	\$ 579.20	not contracted	\$ 579.20	not contracted	\$ 579.20	\$ 579.20
	ZOSTER (SHINGLES)				,			* *************************************		* *******		7 0.0.22		* 0.0.0.0		7 0.0.20			7 0.0.20
	VACCINE (HZV),																		
20752	RECOMBINANT,	DD1144 DV DD 0 05 D 1 1 D 5	20750		_	see	ootnote ****					_							
90750	SUBUNIT,	PRIMARY PROCEDURE	90750		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		IMMUNIZATION																	
		ADMINISTRATION																	
		(INCLUDES			l .		ootnote												
		PERCUTANEOUS, INT OFFICE OR OTHER	90471		\$ 7	74.32	****	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	\$ 74.32
		OUTPATIENT VISIT																	
		FOR THE EVALUATION				see	ootnote												
		AND	99213		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	MEASUREMENT OF POST-VOIDING																		
	RESIDUAL URINE					See	ootnote												
51798	AND/OR BLADD	PRIMARY PROCEDURE	51798		\$ 6	66.72	****	\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	\$ 66.72
		OFFICE OR OTHER																	
		OUTPATIENT VISIT																	
		FOR THE EVALUATION AND	99213		Ś	see	ootnote ****	ċ -	not contracted	\$ -	not contracted	٠ .	not contracted	ė.	not contracted	٠	not contracted	\$ -	\$ -
	PERIODIC	AND	33213		ڊ	-		→ <u>-</u>	not contracted		not contracted	· -	not contracted		not contracted	- ·	not contracted	- ·	· -
	COMPREHENSIVE																		
	PREVENTIVE																		
20222	MEDICINE	DDIA 4 A DV CO COCO : TO	00000			see	ootnote ****	_		<u>,</u>		<u>,</u>		<u>,</u>		_		_	
99396	REEVALUATION	PRIMARY PROCEDURE	99396		\$		****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -

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MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						Л BLUE CROSS re Advantage)		DLINA Advantage)		LINA liConnect)		CARE iConnect)		CARE ered CA)		DLINA ered CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary																		
Code	Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
96372	THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INJECTION (SPE	PRIMARY PROCEDURE	96372		\$ 74.	see footnote	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	\$ 74.32
		OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION	20242			see footnote												
	PERIODIC	AND	99213		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
99395	COMPREHENSIVE PREVENTIVE MEDICINE REEVALUATION	PRIMARY PROCEDURE	99395		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	CHANGE OF CYSTOSTOMY TUBE;					see footnote												4
51705	SIMPLE	PRIMARY PROCEDURE HOSPITAL OUTPATIENT CLINIC VISIT FOR	51705		\$ 318.	98 ****	\$ 318.98	not contracted	\$ 318.98	not contracted	\$ 318.98	not contracted	\$ 318.98	not contracted	\$ 318.98	not contracted	\$ 318.98	\$ 318.98
		ASSESSMENT AND				see footnote												
		MAN	G0463		\$ 142.		\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	\$ 142.43
D1110	PROPHYLAXIS-ADULT	PRIMARY PROCEDURE	D1110		\$ -	see footnote	:	not contracted	ė .	not contracted	ė .	not contracted	خ ۔	not contracted	ė	not contracted	\$ -	ė .
51110	TROTTILAXIS ADOLT	DENTAL PROPHYLAXIS AND TOPICAL	51110		J.		-	not contracted	· -	not contracted	,	not contracted	, -	not contracted	,	not contracted	, -	-
		FLUORIDE TREATMENT	D1208		\$ -	see footnote	:	not contracted	\$ -	not contracted	ė	not contracted	\$ -	not contracted	ė	not contracted	\$ -	ć
		ORAL HYGIENE	D1208		γ -	see footnote	7 -	not contracted	, -	not contracted	7 -	not contracted	, -	not contracted	7	not contracted	, -	7
		INSTRUCTION	D1330		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		LIMITED ORAL EVALUATION - PROBLEM FOCUSED	D0140		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	INITIAL COMPREHENSIVE PREVENTIVE MEDICINE				·	see footnote												
99383	EVALUATION AN	PRIMARY PROCEDURE	99383		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	INTERROGATION DEVICE EVALUATION (IN PERSON) WITH					see footnote												
93288	ANALYS	PRIMARY PROCEDURE	93288		\$ 44.	54 ****	\$ 44.64	not contracted	\$ 44.64	not contracted	\$ 44.64	not contracted	\$ 44.64	not contracted	\$ 44.64	not contracted	\$ 44.64	\$ 44.64
		OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND	99213		\$ -	see footnote	; ;	not contracted	\$ -	not contracted	\$ -	not contracted	s -	not contracted	\$ -	not contracted	\$ -	\$ -
D0120	PERIODIC ORAL EVALUATION - ESTABLISHED PATIENT	PRIMARY PROCEDURE			\$ -	see footnote		not contracted		not contracted		not contracted		not contracted		not contracted		\$ -

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						BLUE CROSS e Advantage)		LINA Advantage)	MO (Cal Med	LINA		CARE liConnect)		CARE red CA)		LINA red CA)	Maximum	Minimum Negotiated Rate
					(iviedical	Auvantage)	(ivieuicare	Auvantage)	(Car ivieu	iconnect)	(Car ivieu	ilconnect)	(Cove	reu CA)	(Cover	reu CA)	Negotiateu kate	Negotiated Kate
Primary Code	Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
Code	Service Category	Service Description	CFI Code	Note	racility	Professional	racility	Professional	racility	Professional	racility	Professional	racility	Professional	racility	Professional	racility	racility
	BLADDER IRRIGATION																	
	SIMPLE, LAVAGE																	
	AND/OR					see footnote												
51700	INSTILLATION	PRIMARY PROCEDURE	51700		\$ 318.9	****	\$ 318.98	not contracted	\$ 318.98	not contracted	\$ 318.98	not contracted	\$ 318.98	not contracted	\$ 318.98	not contracted	\$ 318.98	\$ 318.98
		MEASUREMENT OF																
		POST-VOIDING RESIDUAL URINE				see footnote												
		AND/OR BLADD	51798		\$ 66.7		\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	\$ 66.72
		OFFICE OR OTHER													,			,
		OUTPATIENT VISIT																
		FOR THE EVALUATION				see footnote												
		AND	99215		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	INFLUENZA VACCINE,																	
	INACTIVATED (IIV),					see footnote												
90653	SUBUNIT, ADJUVANT	PRIMARY PROCEDURE	90653		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		IMMUNIZATION ADMINISTRATION																
		(INCLUDES				see footnote												
		PERCUTANEOUS, INT	90471		\$ 74.3		\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	\$ 74.32
		OFFICE OR OTHER																
		OUTPATIENT VISIT																
		FOR THE EVALUATION AND	00343		\$ -	see footnote	4		\$ -		\$ -		<u> </u>				\$ -	\$ -
	INITIAL	AND	99213		\$ -		\$ -	not contracted	> -	not contracted	> -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	COMPREHENSIVE																	
	PREVENTIVE																	
	MEDICINE					see footnote												
99382	EVALUATION AN	PRIMARY PROCEDURE	99382		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	INSERTION OF TEMPORARY																	
	INDWELLING																	
	BLADDER CATHETER;					see footnote												
51702	SIM	PRIMARY PROCEDURE	51702		\$ 135.1	****	\$ 135.16	not contracted	\$ 135.16	not contracted	\$ 135.16	not contracted	\$ 135.16	not contracted	\$ 135.16	not contracted	\$ 135.16	\$ 135.16
		OFFICE OR OTHER																
		OUTPATIENT VISIT				soc footnets												
		FOR THE EVALUATION	99211		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	REMOVAL OF	,	33211		Υ	1	¥	or contracted	¥	ot contracted	¥	.iot contracted	7	.iot contracted	Y	.iot contracted	¥	Ψ
	DEVITALIZED TISSUE																	
	FROM WOUND(S),					see footnote												
97602	NON-SELECT	PRIMARY PROCEDURE	97602		\$ 215.2	****	\$ 215.26	not contracted	\$ 215.26	not contracted	\$ 215.26	not contracted	\$ 215.26	not contracted	\$ 215.26	not contracted	\$ 215.26	\$ 215.26
		OFFICE OR OTHER																
		OUTPATIENT VISIT FOR THE EVALUATION				see footnote												
		AND	99213		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		-			•				•									

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

				[ANTHEM B	LUE CROSS Advantage)	_	LINA Advantage)		LINA iConnect)		CARE iConnect)		CARE red CA)	MOI (Cover		Maximum Negotiated Rate	Minimum Negotiated Rate
Primary																		
Code	Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
00745	TETANUS, DIPHTHERIA TOXOIDS AND ACELLULAR	DDIAADY DDGGEDUDE	00745			see footnote			•									
90/15	PERTUSSIS VAC	PRIMARY PROCEDURE	90715		Ş -	***	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		IMMUNIZATION ADMINISTRATION (INCLUDES PERCUTANEOUS, INT	90471		\$ 74.32	see footnote ****	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	\$ 74.32
		OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND	99213		¢	see footnote ****	ć	not contracted	ć	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	, .	\$ -
76811	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUM	PRIMARY PROCEDURE			\$ 275.82	see footnote	\$ 275.82					not contracted	·			not contracted		
92002	OPHTHALMOLOGICAL SERVICES: MEDICAL EXAMINATION AND	PRIMARY PROCEDURE	92002		\$ 142.43	see footnote ****	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	\$ 142.43
	COMPREHENSIVE ORAL EVALUATION - NEW OR ESTABLISHED		D0450			see footnote												·
D0150	INITIAL COMPREHENSIVE PREVENTIVE MEDICINE	PRIMARY PROCEDURE				see footnote	7 1,002.03					not contracted				not contracted		
	SCANNING COMPUTERIZED OPHTHALMIC DIAGNOSTIC	PRIMARY PROCEDURE	99384 92133		\$ -	**** see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted		not contracted		not contracted		\$ -
	COMPUTERIZED CORNEAL TOPOGRAPHY, UNILATERAL OR					see footnote				not contracted		not contracted				not contracted		
92025	BILATERA	PRIMARY PROCEDURE OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND			\$ 66.72 \$ -	see footnote	\$ 66.72	not contracted	\$ 66.72 \$ -	not contracted		not contracted		not contracted	\$ 66.72 \$ -	not contracted		\$ 66.72
58100	ENDOMETRIAL SAMPLING (BIOPSY) WITH OR WITHOUT ENDOCERVI	PRIMARY PROCEDURE	58100		\$ 204.21	see footnote ****	\$ 204.21	not contracted	\$ 204.21	not contracted	\$ 204.21	not contracted	\$ 204.21	not contracted	\$ 204.21	not contracted	\$ 204.21	\$ 204.21

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

							LUE CROSS Advantage)		LINA Advantage)		LINA liConnect)		CARE liConnect)		CARE red CA)		DLINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary						an aliah			- 6										
Code	Service Category	Service Description OFFICE OR OTHER	CPT Code	Note	Facil	lity**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		OUTPATIENT VISIT																	
		FOR THE EVALUATION					see footnote												
		AND	99213		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		LEVEL IV - SURGICAL																	
		PATHOLOGY, GROSS					see footnote												
		AND MICROSCOPIC EX	88305		\$	59.57	****	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	\$ 59.57
	PSYCHIATRIC																		
	DIAGNOSTIC						soo faatnata												
90792	EVALUATION WITH MEDICAL SERVICES	PRIMARY PROCEDURE	90792		\$	160.39	see footnote ****	\$ 160.39	not contracted	\$ 160.39	not contracted	\$ 160.39	not contracted	\$ 160.39	not contracted	\$ 160.39	not contracted	\$ 160.39	\$ 160.39
30732	THE STORE OF THE SE	OFFICE OR OTHER	30732		Ť	200.03		ψ 100.03	1101 001111 00100	ψ 100.03		ψ 100.03	not contracted	ψ 100.03	1101 001111 00100	ψ 100.03	not contracted	ψ 100.03	Ţ 100.03
		OUTPATIENT VISIT																	
		FOR THE EVALUATION					see footnote												
	INFLUENZA VIRUS	AND	99205		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	VACCINE,																		
	QUADRIVALENT (IIV4),	,					see footnote												
90686	SPLIT VIR	PRIMARY PROCEDURE	90686		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		IMMUNIZATION ADMINISTRATION																	
		(INCLUDES					see footnote												
		PERCUTANEOUS, INT	90471		\$	74.32	***	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	\$ 74.32
		OFFICE OR OTHER																	
		OUTPATIENT VISIT					6												
		FOR THE EVALUATION AND	99213		Ś	_	see footnote ****	¢ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	¢ -	not contracted	\$ -	¢ .
	INFLUENZA VIRUS	71112	33213		7			7	Hot contracted	7	not contracted	Ÿ	not contracted	Ÿ	Hot contracted	7	not contracted	7	Ÿ
	VACCINE,																		
	QUADRIVALENT						see footnote											l .	
90694	(AIIV4), INACTIVA	PRIMARY PROCEDURE	90694		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		IMMUNIZATION																	
		ADMINISTRATION																	
		(INCLUDES					see footnote												
		PERCUTANEOUS, INT	90471		\$	74.32	****	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	\$ 74.32
		OFFICE OR OTHER OUTPATIENT VISIT																	
		FOR THE EVALUATION					see footnote												
		AND	99213		\$	-	***	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	ULTRASOUND,																		
	PREGNANT UTERUS,						000 ft												
76815	REAL TIME WITH IMAGE DOCUM	PRIMARY PROCEDURE	76815		\$	130.50	see footnote ****	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	\$ 130.50
, 0013	VITRECTOMY,		, 0013		7	130.30		÷ 130.30	not contracted	÷ 130.30	not contracted	7 130.30	not contracted	Ţ 130.30	not contracted	÷ 150.50	not contracted	÷ 150.50	7 150.50
	MECHANICAL, PARS																		
	PLANA APPROACH;				1.		see footnote					1.		1.					
67040	WITH ENDOL	PRIMARY PROCEDURE	67040		\$.	4,694.32	****	\$ 4,694.32	not contracted	\$ 4,694.32	not contracted	\$ 4,694.32	not contracted	\$ 4,694.32	not contracted	\$ 4,694.32	not contracted	\$ 4,694.32	\$ 4,694.32

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

					ANTHEM B (Medicare A			LINA Advantage)	MO (Cal Med	LINA iConnect)		CARE iConnect)		CARE red CA)		LINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		OPHTHALMOLOGICAL SERVICES: MEDICAL EXAMINATION AND EVAL	92012		\$ 142.43	see footnote	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43		\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	
49082	ABDOMINAL PARACENTESIS (DIAGNOSTIC OR THERAPEUTIC); WIT	PRIMARY PROCEDURE	49082		\$ 969.93	see footnote ****	\$ 969.93	not contracted		not contracted				not contracted		not contracted		
20610	ARTHROCENTESIS, ASPIRATION AND/OR INJECTION, MAJOR JOIN	PRIMARY PROCEDURE	20610		\$ 313.18	see footnote ****	\$ 313.18	not contracted	\$ 313.18	not contracted	\$ 313.18	not contracted	\$ 313.18	not contracted	\$ 313.18	not contracted	\$ 313.18	\$ 313.18
		OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND	99212		\$ -	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, LIDOCAINE HCL FOR INTRAVENOUS INFUSION, 10 M	J2001		\$ -	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, TRIAMCINOLONE ACETONIDE, NOT OTHERWISE SPECI	J3301		\$ -	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, BUPIVICAINE HYDROCHLORIDE, 30 ML	S0020		not available	not available	not available	not contracted	not available	not contracted	not available	not contracted	not available	not contracted	not available	not contracted	not available	not available
	INTRAVENOUS INFUSION, FOR THERAPY, PROPHYLAXIS, OR				oc available	see footnote	oravanasie		o. available		1100 010110		not at an abre		not a vanazie	not contracted	nordrandore	not a randone
96365	,	PRIMARY PROCEDURE INJECTION, SODIUM	96365		\$ 245.22	****	\$ 245.22	not contracted	\$ 245.22	not contracted	\$ 245.22	not contracted	\$ 245.22	not contracted	\$ 245.22	not contracted	\$ 245.22	\$ 245.22
	TETAL NON STREES	FERRIC GLUCONATE COMPLEX IN SUCROSE I	J2916		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
59025	FETAL NON-STRESS TEST	PRIMARY PROCEDURE ULTRASOUND,	59025		\$ 204.21	see footnote ****	\$ 204.21	not contracted	\$ 204.21	not contracted	\$ 204.21	not contracted	\$ 204.21	not contracted	\$ 204.21	not contracted	\$ 204.21	\$ 204.21
		PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUM	76815		\$ 130.50	see footnote	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	\$ 130.50
43237	ESOPHAGOGASTROD UODENOSCOPY, FLEXIBLE, TRANSORAL; WITH E	PRIMARY PROCEDURE	43237		\$ 1,946.95	see footnote ****	\$ 1,946.95	not contracted	\$ 1,946.95	not contracted	\$ 1,946.95	not contracted	\$ 1,946.95	not contracted	\$ 1,946.95	not contracted	\$ 1,946.95	\$ 1,946.95

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

									LINA Advantage)	MO (Cal Med	LINA iConnect)		CARE liConnect)		. CARE ered CA)		LINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Fac	cility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		ENDOSCOPIC						-		•									
		RETROGRADE CHOLANGIOPANCREA					see footnote												
		TOGRAPHY (ERCP);	43275		\$	3,680.61	****	\$ 3,680.61	not contracted	\$ 3,680.61	not contracted	\$ 3,680.61	not contracted	\$ 3,680.61	not contracted	\$ 3,680.61	not contracted	\$ 3,680.61	\$ 3,680.61
		ENDOSCOPIC																	
		CATHETERIZATION OF THE BILIARY DUCTAL					see footnote												
		SYSTEM	74328		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		ENDOSCOPIC																	
		CANNULATION OF PAPILLA WITH DIRECT					see footnote												
		VISUALIZA	43273		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		COMBINED																	
		ENDOSCOPIC CATHETERIZATION OF					see footnote												
		THE BILIARY AND	74330		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION,																	
		SUCCINYLCHOLINE CHLORIDE, UP TO 20					see footnote												
		MG	J0330		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION,																	
		ONDANSETRON HYDROCHLORIDE, PER					see footnote												
		1 MG	J2405		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, PROPOFOL, 10 MG	J2704		Ś		see footnote ****	ć	not contracted	ć	not contracted	ć	not contracted	ć	not contracted	ć	not contracted	ć	ć
		FROFOLOE, 10 MG	32704		,	-		Э -	not contracted	\$ -	not contracted	· -	not contracted	٠ -	not contracted	Ş -	not contracted	-	ş -
		INJECTION, FENTANYL					see footnote												
		CITRATE, 0.1 MG RINGERS LACTATE	J3010		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INFUSION, UP TO					see footnote												
		1000 CC	J7120		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	FLUORESCEIN ANGIOGRAPHY																		
	(INCLUDES																		
	MULTIFRAME				1.		see footnote									l .			
92235	IMAGING) W INTRAORAL-	PRIMARY PROCEDURE	92235		\$	317.24	****	\$ 317.24	not contracted	\$ 317.24	not contracted	\$ 317.24	not contracted	\$ 317.24	not contracted	\$ 317.24	not contracted	\$ 317.24	\$ 317.24
	PERIAPICAL-FIRST						see footnote												
D0220	FILM	PRIMARY PROCEDURE	D0220		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		LIMITED ORAL EVALUATION -					see footnote												
		PROBLEM FOCUSED	D0140		\$		****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	HYSTEROSCOPY,							_						_					
	SURGICAL; WITH SAMPLING (BIOPSY)				1		see footnote												
58558	OF ENDOM	PRIMARY PROCEDURE	58558		\$	3,145.00	****	\$ 3,145.00	not contracted	\$ 3,145.00	not contracted	\$ 3,145.00	not contracted	\$ 3,145.00	not contracted	\$ 3,145.00	not contracted	\$ 3,145.00	\$ 3,145.00
		ANESTHESIA FOR																_	
		VAGINAL PROCEDURES			1														
		(INCLUDING BIOPSY			1		see footnote												
		OF	00952		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						M BLUE CROSS are Advantage)		LINA Advantage)		LINA liConnect)		CARE diConnect)		CARE red CA)		DLINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facility*	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		LEVEL IV - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EX	88305		\$ 5	see footnote ****	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	d \$ 59.57	\$ 59.57
		BLOOD COUNT; COMPLETE (CBC), AUTOMATED (HGB, HCT, RBC,	85025		\$	see footnote	\$ 7.77	not contracted	\$ 7.77	not contracted	\$ 7.77	not contracted	\$ 7.77	not contracted	\$ 7.77	not contracted	d \$ 7.77	\$ 7.77
		INJECTION, MIDAZOLAM HYDROCHLORIDE, PER 1 MG	J2250		\$	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	d \$ -	\$ -
		INJECTION, FENTANYL CITRATE, 0.1 MG RINGERS LACTATE	J3010		\$	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	d \$ -	\$ -
		INFUSION, UP TO 1000 CC ANTIBODY SCREEN,	J7120		\$	see footnote - ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	d \$ -	\$ -
		RBC, EACH SERUM TECHNIQUE BLOOD TYPING, SEROLOGIC; RH (D)	86850 86901			see footnote **** see footnote ****	\$ 59.57 \$ 40.57	not contracted		not contracted					•			
		BLOOD TYPING, SEROLOGIC; ABO COLLECTION OF	86900		\$ 13	see footnote	•	not contracted							•	not contracted		ψ 10.57
		VENOUS BLOOD BY VENIPUNCTURE	36415		\$	see footnote ****	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	d \$ 3.00	\$ 3.00
P T	MYOCARDIAL PERFUSION IMAGING, TOMOGRAPHIC	PRIMARY PROCEDURE	78452		\$ 1.56	see footnote	4		4		4 455544		4 455		4.555.44		1 4 555 11	4
78452 (3	SPECT) (INCL	INJECTION, REGADENOSON, 0.1 MG	J2785		\$ 1,56	see footnote	\$ 1,566.44 \$ -	not contracted		not contracted		not contracted			\$ 1,566.44 \$ -	not contracted		\$ 1,566.44
U FI	SOPHAGOGASTROD JODENOSCOPY, LEXIBLE, TRANSORAL; WITH B	PRIMARY PROCEDURE	43244		\$ 1,94	see footnote	\$ 1,946.95	not contracted	\$ 1,946.95	not contracted	\$ 1,946.95	not contracted	\$ 1,946.95	not contracted	\$ 1,946.95	not contracted	d \$ 1,946.95	\$ 1,946.95
	,	INJECTION, MIDAZOLAM HYDROCHLORIDE, PER 1 MG	J2250		\$	see footnote	\$ -	not contracted		not contracted		not contracted		not contracted		not contracted		\$ -
		INJECTION, FENTANYL CITRATE, 0.1 MG	J3010		\$	see footnote	\$ -	not contracted		not contracted		not contracted		not contracted	•	not contracted		\$ -
P	EUNDUS PHOTOGRAPHY WITH NTERPRETATION AND REPORT	PRIMARY PROCEDURE	92250		\$ 13	see footnote ****	\$ 135.16	not contracted	\$ 135.16	not contracted	\$ 135.16	not contracted	\$ 135.16	not contracted	\$ 135.16	not contracted	d \$ 135.16	\$ 135.16

LAC+USC MEDICAL CENTER

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						BLUE CROSS e Advantage)		LINA Advantage)		LINA liConnect)		CARE diConnect)		. CARE ered CA)		DLINA ered CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary														- 6		- 6		
Code	Service Category EXCHANGE	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
	NEPHROSTOMY																	
	CATHETER,																	
E042E	PERCUTANEOUS, INCLUDING	PRIMARY PROCEDURE	50435		\$ 2.146.2	see footnote	\$ 2.146.29	not contracted	ć 2.14C.20	not contracted	\$ 2,146,20	not contractor	¢ 2.146.20	not contracted	¢ 2.146.20	not contracted	¢ 2.146.20	¢ 2.146.20
30433	INCLUDING	CHANGE OF	30433		\$ 2,146.2	9	\$ 2,146.29	not contracted	\$ 2,146.29	not contracted	\$ 2,146.29	not contracted	\$ 2,146.29	not contracted	\$ 2,146.29	not contracted	\$ 2,146.29	\$ 2,146.29
		PERCUTANEOUS TUBE																
		OR DRAINAGE				see footnote												
		CATHETER WITH C INJECTION,	75984		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		MIDAZOLAM																
		HYDROCHLORIDE, PER				see footnote												
		1 MG	J2250		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, FENTANYL				see footnote												
		CITRATE, 0.1 MG	J3010		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	OPHTHALMIC																	
	BIOMETRY BY ULTRASOUND																	
	ECHOGRAPHY, A-					see footnote												
76519	SCAN; W	PRIMARY PROCEDURE	76519		\$ 130.5		\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	not contracted	\$ 130.50	\$ 130.50
		COMPUTERIZED																
		CORNEAL TOPOGRAPHY,																
		UNILATERAL OR				see footnote												
		BILATERA	92025		\$ 66.7	2 ****	\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.72	\$ 66.72
	CATUETED																	
	CATHETER PLACEMENT IN																	
	CORONARY ARTERY(S))				see footnote												
93458	FOR CORONARY A	PRIMARY PROCEDURE	93458		\$ 3,475.9	4 ****	\$ 3,475.94	not contracted	\$ 3,475.94	not contracted	\$ 3,475.94	not contracted	\$ 3,475.94	not contracted	\$ 3,475.94	not contracted	\$ 3,475.94	\$ 3,475.94
		INJECTION, HEPARIN SODIUM, PER 1000				see footnote												
		UNITS	J1644		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION,																
		LIDOCAINE HCL FOR																
		INTRAVENOUS INFUSION, 10 M	J2001		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	Ś -	not contracted	\$ -	not contracted	\$ -	not contracted	s -	\$ -
		INJECTION,	32001		7	1	¥	not contracted	Υ	not contracted	*	not contracted	-	not contracted		not contracted	7	7
		MIDAZOLAM																
		HYDROCHLORIDE, PER	J2250		\$ -	see footnote	ć	not or it is	ć	not occition of	ć	not 0	ć		,	not o	,	
		1 MG	J225U		\$ -	****	> -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	> -	not contracted	\$ -	\$ -
		INJECTION, FENTANYL				see footnote												
		CITRATE, 0.1 MG	J3010		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	COMPREHENSIVE AUDIOMETRY																	
	THRESHOLD																	
	EVALUATION AND					see footnote												1
92557	SPEEC	PRIMARY PROCEDURE	92557		\$ 167.3	6 ****	\$ 167.36	not contracted	\$ 167.36	not contracted	\$ 167.36	not contracted	\$ 167.36	not contracted	\$ 167.36	not contracted	\$ 167.36	\$ 167.36

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MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

							LUE CROSS Advantage)		LINA Advantage)		LINA iConnect)		. CARE diConnect)		CARE red CA)	_	LINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary																			
Code	Service Category	Service Description TYMPANOMETRY	CPT Code	Note	Faci	lity**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		AND REFLEX THRESHOLD MEASUREMENTS	92550		\$	167.36	see footnote	\$ 167.36	not contracted	\$ 167.36	not contracted	\$ 167.3	not contracted	\$ 167.36	not contracted	\$ 167.36	not contracted	\$ 167.36	\$ 167.36
	MEDICATION THERAPY MANAGEMENT SERVICE(S) PROVIDED				·		see footnote			,									
99606	` '	PRIMARY PROCEDURE	99606		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	DETERMINATION OF REFRACTIVE STATE	PRIMARY PROCEDURE	92015		\$	-	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	OPHTHALMOLOGICAL SERVICES: MEDICAL EXAMINATION AND	PRIMARY PROCEDURE			Ś	142.43	see footnote	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.4:	not contracted	\$ 142.43			not contracted	\$ 142.43	\$ 142.43
	CYSTOURETHROSCOP Y, WITH REMOVAL OF FOREIGN BODY,		32001		Ÿ	142.43	see footnote	7 142.43	not contracted	7 172.73	not contracted	¥ 272.7	not contracted	7 172.73	not contracted	y 142.43	not contracted	ÿ 142.43	ŷ 142.43
52310	CALCUL	PRIMARY PROCEDURE	52310		\$	2,146.29	****	\$ 2,146.29	not contracted	\$ 2,146.29	not contracted	\$ 2,146.2	not contracted	\$ 2,146.29	not contracted	\$ 2,146.29	not contracted	\$ 2,146.29	\$ 2,146.29
D0210	INTRAORAL- COMPLETE SERIES (INCLUDING BITEWINGS)	PRIMARY PROCEDURE	D0210		\$	_	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		COMPREHENSIVE ORAL EVALUATION - NEW OR ESTABLISHED PATI	D0150		\$	1,662.69	see footnote	\$ 1,662.69	not contracted	\$ 1,662.69	not contracted	\$ 1,662.69	not contracted	\$ 1,662.69	not contracted	\$ 1,662.69	not contracted	\$ 1,662.69	\$ 1,662.69
	INFLUENZA VIRUS VACCINE, TRIVALENT	.,	50130		<u> </u>	1,002.03	see footnote	ψ 1,002.03	not contracted	y 1/002.03	not continued	V 2)00210.	Not continuous	ψ 2,002.03	not some detect	Ų 1,002.103	not contracted	Ψ 1,002.03	7,002,003
90658	(IIV3), SPLIT VIRUS,	PRIMARY PROCEDURE	90658		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		IMMUNIZATION ADMINISTRATION (INCLUDES PERCUTANEOUS, INT	90471		\$	74.32	see footnote ****	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.3	2 not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	\$ 74.32
		OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND	99213		Ś	_	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	s -	not contracted	\$ -	\$ -
	CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY		2223		T		see footnote	,		,								,	,
88175	REPORTING SYSTE	PRIMARY PROCEDURE	88175		\$	26.61	****	\$ 26.61	not contracted	\$ 26.61	not contracted	\$ 26.6	not contracted	\$ 26.61	not contracted	\$ 26.61	not contracted	\$ 26.61	\$ 26.61
		OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION					see footnote												
		AND	99213		\$	-	****	\$ -	not contracted	Ş -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						BLUE CROSS Advantage)	_	LINA Advantage)		LINA iConnect)		CARE liConnect)		CARE ered CA)	_	LINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary	Camila Catanani	Comitee Beautistics	CDT CI-	Nete	F 1114 - **	Dueferslauel	F - 1114 . **	Du-f!!***	F 1114 * *	Df!***	P 1114 * *	Df!!***	F	Df!!***	F 1114 **	Du-f!!***	F 1114 * *	F
Code	Service Category	Service Description INFECTIOUS AGENT	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		DETECTION BY																
		NUCLEIC ACID (DNA				see footnote												
		OR RNA)	87624		\$ 35.09	****	\$ 35.09	not contracted	\$ 35.09	not contracted	\$ 35.09	not contracted	\$ 35.09	not contracted	\$ 35.09	not contracted	\$ 35.09	\$ 35.09
		CYTOPATHOLOGY,																
		CERVICAL OR VAGINAL (ANY				see footnote												
		REPORTING SYSTE	88142		\$ 20.26		\$ 20.26	not contracted	\$ 20.26	not contracted	\$ 20.26	not contracted	\$ 20.26	not contracted	\$ 20.26	not contracted	\$ 20.26	\$ 20.26
	POSTERIOR TIBIAL	112. 011.1110 01012	00112		20.20		20.20	not contracted	ψ 20.20	not contracted	Ţ 20.20	not contracted	20.20	not contracted	20.20	not contracted	20.20	20.20
	NEUROSTIMULATION,	,																
	PERCUTANEOUS					see footnote												
64566	NEEDLE	PRIMARY PROCEDURE	64566		\$ 313.18	****	\$ 313.18	not contracted	\$ 313.18	not contracted	\$ 313.18	not contracted	\$ 313.18	not contracted	\$ 313.18	not contracted	\$ 313.18	\$ 313.18
		OFFICE OR OTHER OUTPATIENT VISIT																
		FOR THE EVALUATION				see footnote												
		AND	99213		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	CARIES RISK																	
	ASSESSMENT AND																	
	DOCUMENTATION,					see footnote												
D0603	WITH A FINDIN	PRIMARY PROCEDURE TOPICAL FLUORIDE	D0603		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		VARNISH;																
		THERAPEUTIC				see footnote												
		APPLICATION FOR M	D1206		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
						see footnote												
		PROPHYLAXIS-CHILD	D1120		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		ORAL HYGIENE	D4220		\$ -	see footnote	ć		*		<u> </u>				<u> </u>		<u> </u>	4
		INSTRUCTION ORAL EVALUATION	D1330		\$ -		> -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		FOR A PATIENT																
		UNDER THREE YEARS				see footnote												
		OF AGE	D0145		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	IMMUNIZATION																	
	ADMINISTRATION																	
00460	THROUGH 18 YEARS OF AGE VIA	PRIMARY PROCEDURE	90460		\$ -	see footnote	ć	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	ć	not contracted	\$ -	\$ -
30400	OT AUL VIA	IMMUNIZATION	50400		- د		- پ	not contracted	- پ	not contracted	- ب	not contracted	- ·	not contracted	- ب	not contracted	\$ -	- پ
		ADMINISTRATION]
		THROUGH 18 YEARS				see footnote]
		OF AGE VIA	90461		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		OFFICE OR OTHER																
		OUTPATIENT VISIT																
		FOR THE EVALUATION AND	99212		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	¢ -	not contracted	\$ -	not contracted	\$ -	ς .
		7.1140	33212		 			not contracted	-	not contracted	-	not contracted		not contracted	-	not contracted		-
I	ZOSTER (SHINGLES)																	
	VACCINE (HZV), LIVE,					see footnote]
90736	FOR SUBCUTANEOUS	PRIMARY PROCEDURE	90736		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						BLUE CROSS e Advantage)		LINA Advantage)		LINA iConnect)		CARE liConnect)		CARE red CA)		LINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
5525	Service dategory	Jennie Beschiphen	J. 1 JOUG		1 domey	1101030101101	. admity	1101000101101	. uemey	1101000101101	. admity	1101000101101	. acmey		· usinity		. usiney	. usinity
		IMMUNIZATION																
		ADMINISTRATION																
		(INCLUDES PERCUTANEOUS, INT	90471		\$ 74.32	see footnote	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	\$ 74.32
		OFFICE OR OTHER	30471		Ş 74.32		\$ 74.32	not contracted	<i>\$</i> 74.52	not contracted	\$ 74.3Z	not contracted	3 /4.3Z	not contracted	\$ 74.3Z	not contracted	\$ 74.52	\$ 74.32
		OUTPATIENT VISIT																
		FOR THE EVALUATION				see footnote												
		AND	99213		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	D. I. I. A. C. C. C. A. I.																	
	PNEUMOCOCCAL CONJUGATE VACCINE,																	
	13 VALENT (PCV13),	'				see footnote												
90670		PRIMARY PROCEDURE	90670		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
					,		,				,						,	
		IMMUNIZATION																
		ADMINISTRATION																
		(INCLUDES	00474		. 74.00	see footnote	. 74.00		4 74.33		4 74.00		. 74.00		4 74.00			4 74.00
		PERCUTANEOUS, INT OFFICE OR OTHER	90471		\$ 74.32		\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	\$ 74.32
		OUTPATIENT VISIT																
		FOR THE EVALUATION				see footnote												
		AND	99213		\$ -		\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	DEBRIDEMENT,																	
	SUBCUTANEOUS																	
11012	TISSUE (INCLUDES EPIDERMIS AN	DDIA A A DV DDOCEDUDE	11012		\$ 414.32	see footnote	ć 44.4.22		ć 444.22		ć 44.4.22		ć 44.4.22		44422		ć 44.4.22	ć 44.4.22
11042	EPIDERIVIIS AN	PRIMARY PROCEDURE OFFICE OR OTHER	11042		\$ 414.32		\$ 414.32	not contracted	\$ 414.32	not contracted	\$ 414.32	not contracted	\$ 414.32	not contracted	\$ 414.32	not contracted	\$ 414.32	\$ 414.32
		OUTPATIENT VISIT																
		FOR THE EVALUATION				see footnote												
		AND	99212		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	SLEEP STUDY,																	
	UNATTENDED,																	
	SIMULTANEOUS RECORDING OF, HEA	DDIA A A DV DDOCEDUDE	05000		\$ 167.36	see footnote	ć 467.26		ć 167.26		ć 467.26		ć 167.26		467.26		ć 467.26	ć 167.26
95806	RECORDING OF, HEA	PRIMARY PROCEDURE EDUCATION AND	95806		\$ 167.36)	\$ 167.36	not contracted	\$ 167.36	not contracted	\$ 167.36	not contracted	\$ 167.36	not contracted	\$ 167.36	not contracted	\$ 167.36	\$ 167.36
		TRAINING FOR																
		PATIENT SELF-				see footnote												
		MANAGEMENT BY A	98960		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	CHEMODENERVATION	1																
	OF MUSCLE(S);																	
64612	MUSCLE(S) INNERVATED BY	DDIMARY DDOCEDURE	64612		¢ 212.10	see footnote	ć 212.10	not contracted	ć 212.10	not contracted	ć 212.10	not contracted	¢ 212.10	not contracted	¢ 212.10	not contracted	¢ 212.10	ć 212.10
04012	INNERVALED BY	PRIMARY PROCEDURE OFFICE OR OTHER	64612		\$ 313.18	,	\$ 313.18	not contracted	\$ 313.18	not contracted	\$ 313.18	not contracted	\$ 313.18	not contracted	\$ 313.18	not contracted	\$ 313.18	\$ 313.18
		OUTPATIENT VISIT																
		FOR THE EVALUATION				see footnote												
		AND	99213		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	OFFICE								- 									
	CONSULTATION FOR																	
	A NEW OR ESTABLISHED					see footnote												
99242	PATIENT, W	PRIMARY PROCEDURE	99242		s -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	,	ς .
J324Z	17.11LIVI, VV	I MINIOR I LINOCEDORE	33242		<u> </u>	1	· -	not contracted	7 -	not contracted	· ·	not contracted	· -	not contracted	<u> </u>	not contracted	· ·	· -

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MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

							LUE CROSS Advantage)		LINA Advantage)		LINA iConnect)		A. CARE ediConnect)		CARE red CA)		DLINA ered CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Fa	cility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
	CYSTOURETHROSCOP Y, WITH INSERTION OF INDWELLING URETERA	PRIMARY PROCEDURE	52332		\$	3,685.46	see footnote	\$ 3,685.46	not contracted	\$ 3,685.46	not contracted	\$ 3,685.	not contracted	\$ 3,685.46	not contracted	d \$ 3,685.46	not contracted	\$ 3,685.46	\$ 3,685.46
		UROGRAPHY, RETROGRADE, WITH OR WITHOUT KUB	74420		\$	441.42	see footnote	\$ 441.42	not contracted	\$ 441.42	not contracted	\$ 441.	not contracted	\$ 441.42	not contracted	i \$ 441.42	not contracted	\$ 441.42	\$ 441.42
		INJECTION, MORPHINE SULFATE, UP TO 10 MG	J2270		\$	-	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	i \$ -	not contracted	\$ -	\$ -
	SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-C	PRIMARY PROCEDURE	91300		\$	-	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	1 \$ -	not contracted	\$ -	\$ -
		OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND	99213		\$	-	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	1 \$ -	not contracted	\$ -	\$ -
	PNEUMOCOCCAL POLYSACCHARIDE VACCINE, 23-VALENT (PPSV23)	PRIMARY PROCEDURE	90732		\$	-	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	1 \$ -	not contracted	\$ -	\$ -
		IMMUNIZATION ADMINISTRATION (INCLUDES PERCUTANEOUS, INT	90471		\$	74.32	see footnote	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.	32 not contracted	\$ 74.32	not contracted	i \$ 74.32	not contracted	\$ 74.32	\$ 74.32
		OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND	99213		\$	1	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	1 \$ -	not contracted	\$ -	\$ -
	CYSTOURETHROSCOP Y, WITH URETEROSCOPY AND/OR PYELOSCOPY	; PRIMARY PROCEDURE	52356		\$	5,288.56	see footnote	\$ 5,288.56	not contracted	\$ 5,288.56	not contracted	\$ 5.288	56 not contracted	\$ 5,288.56	not contracted	i \$ 5,288.56	not contracted	\$ 5,288.56	\$ 5,288.56
32330		ANESTHESIA FOR LITHOTRIPSY, EXTRACORPOREAL SHOCK WAVE;	00872		\$	-	see footnote	\$ -	not contracted	,	not contracted	,			not contracted	,	not contracted	,	\$ -
		FLUOROSCOPY (SEPARATE PROCEDURE), UP TO 1 HOUR PHYSICIA ELECTROCARDIOGRA	76000		\$	275.82	see footnote	\$ 275.82	not contracted	\$ 275.82	not contracted	\$ 275.	not contracted	\$ 275.82	not contracted	j \$ 275.82	not contracted	\$ 275.82	\$ 275.82
		M, ROUTINE ECG WITH AT LEAST 12 LEADS;	93005		\$	66.72	see footnote	\$ 66.72	not contracted	\$ 66.72	not contracted	\$ 66.	72 not contracted	\$ 66.72	not contracted	d \$ 66.72	not contracted	\$ 66.72	\$ 66.72

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

					ANTHEM B			LINA Advantage)	MO (Cal Med	LINA iConnect)		CARE liConnect)		CARE red CA)		LINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		CALCULUS; INFRARED				see footnote												
		SPECTROSCOPY INJECTION,	82365		\$ 12.90	****	\$ 12.90	not contracted	\$ 12.90	not contracted	\$ 12.90	not contracted	\$ 12.90	not contracted	\$ 12.90	not contracted	\$ 12.90	\$ 12.90
		SUCCINYLCHOLINE CHLORIDE, UP TO 20				see footnote												
		MG	J0330		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION,																
		CEFTRIAXONE SODIUM, PER 250 MG	J0696		ė	see footnote	ė	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	ė	not contracted	\$ -	\$ -
		INJECTION,	30030		, -	_	· -	not contracted	y -	not contracted	, -	not contracted	y -	not contracted	7	not contracted	, -	ý -
		PROCHLORPERAZINE, UP TO 10 MG	J0780		\$ -	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, DEXAMETHASONE																
		SODIUM PHOSPHATE,				see footnote												_
		1 MG INJECTION,	J1100		\$ -	****	Ş -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	Ş -	not contracted	\$ -	\$ -
		MEPERIDINE HYDROCHLORIDE, PER				see footnote												
		100 MG	J2175		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, MIDAZOLAM																
		HYDROCHLORIDE, PER 1 MG	J2250		\$ -	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION,			·		-		<u>, , , , , , , , , , , , , , , , , , , </u>		, T		<u>, , , , , , , , , , , , , , , , , , , </u>		T		7	т
		ONDANSETRON HYDROCHLORIDE, PER				see footnote												
		1 MG INJECTION,	J2405		\$ -	**** see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		PROPOFOL, 10 MG INJECTION,	J2704		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		METOCLOPRAMIDE				see footnote												
		HCL, UP TO 10 MG	J2765		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, FENTANYL CITRATE, 0.1 MG	J3010		\$ -	see footnote	\$ -	not contracted	¢ .	not contracted	\$ -	not contracted	\$ -	not contracted	ς .	not contracted	\$ -	\$ -
	MEDICAL NUTRITION	2	33010		7		T	Sommacted	7	sommacted	7	Sommucicu	7	Sommacted	7	contracted	7	7
	MEDICAL NUTRITION THERAPY; INITIAL																	
97802	ASSESSMENT AND INTER	PRIMARY PROCEDURE	97802		\$ -	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	CATHETER																	
	PLACEMENT IN																	
	CORONARY ARTERY(S) FOR CORONARY A	PRIMARY PROCEDURE	93456		\$ 3,475.94	see footnote ****	\$ 3,475.94	not contracted	\$ 3,475.94	not contracted	\$ 3,475.94	not contracted	\$ 3,475.94	not contracted	\$ 3,475.94	not contracted	\$ 3,475.94	\$ 3,475.94
		GASES, BLOOD, ANY																
		COMBINATION OF PH, PCO2, PO2, CO2, HC	82803		\$ 26.07	see footnote	\$ 26.07	not contracted	\$ 26.07	not contracted	\$ 26.07	not contracted	\$ 26.07	not contracted	\$ 26.07	not contracted	\$ 26.07	\$ 26.07

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MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						EM BLUE CROSS care Advantage)	_	LINA Advantage)	_	LINA liConnect)		CARE iConnect)		CARE red CA)	_	LINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facility*	* Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		INJECTION, LIDOCAINE HCL FOR INTRAVENOUS INFUSION, 10 M	J2001		\$	see footnote		not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
64644	CHEMODENERVATION OF ONE EXTREMITY; 5 OR MORE MUSCLES		64644		\$ 76	see footnote		not contracted	\$ 761.17	not contracted	\$ 761.17	not contracted	\$ 761.17	not contracted	\$ 761.17	not contracted	\$ 761.17	\$ 761.17
		OUTPATIENT CLINIC VISIT FOR ASSESSMENT AND MAN	G0463		\$ 14	see footnote		not contracted	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	\$ 142.43
		INJECTION, ONABOTULINUMTOXI NA, 1 UNIT	J0585		\$	see footnote		not contracted	\$ 7.31	not contracted	\$ 7.31	not contracted	\$ 7.31	not contracted	\$ 7.31	not contracted	\$ 7.31	\$ 7.31
93247	EXTERNAL ELECTROCARDIOGRAP HIC RECORDING FOR MORE THAN 7	PRIMARY PROCEDURE	93247		\$ 13	see footnote		not contracted	\$ 135.16	not contracted	\$ 135.16	not contracted	\$ 135.16	not contracted	\$ 135.16	not contracted	\$ 135.16	\$ 135.16
93789	INTERROGATION DEVICE EVALUATION (IN PERSON) WITH ANALYS	PRIMARY PROCEDURE	93289		\$ 4	see footnote		not contracted	\$ 44.64	not contracted	\$ 44.64	not contracted	\$ 44.64	not contracted	\$ 44.64	not contracted	\$ 44.64	\$ 44.64
	LAPAROSCOPY, SURGICAL; WITH REMOVAL OF ADNEXAL STRUCTUR	PRIMARY PROCEDURE			\$ 6,00	see footnote	2 44.04		·	not contracted						not contracted		
		LEVEL II - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EX	88302		\$ 2	see footnote		not contracted	\$ 29.61	not contracted	\$ 29.61	not contracted	\$ 29.61	not contracted	\$ 29.61	not contracted	\$ 29.61	\$ 29.61
		INJECTION, DEXAMETHASONE SODIUM PHOSPHATE, 1 MG	J1100		\$	see footnote		not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, MIDAZOLAM HYDROCHLORIDE, PER 1 MG	J2250		\$	see footnote	; ; \$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, ONDANSETRON HYDROCHLORIDE, PER 1 MG INJECTION,	J2405		\$	see footnote **** see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		PROPOFOL, 10 MG INJECTION, FENTANYL	J2704		\$	see footnote	2	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		CITRATE, 0.1 MG	J3010		\$	- ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						LUE CROSS Advantage)		LINA Advantage)	_	LINA iConnect)		. CARE diConnect)		CARE red CA)		DLINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code Service Category	Service Description	CPT Code	Note	Facili	tv**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
RESIN-BASED COMPOSITE - TWO SURFACES, D2392 POSTERIOR	PRIMARY PROCEDURE		Note	Ś	.y _	see footnote	s -	not contracted		not contracted		not contracted	s -	not contracted	\$ -	not contracted		s -
22032 1 0072/110/1	ORAL HYGIENE INSTRUCTION	D1330		Ś	_	see footnote	\$ -	not contracted		not contracted	·	not contracted		not contracted	\$ -	not contracted		\$ -
	LIMITED ORAL EVALUATION - PROBLEM FOCUSED	D0140		\$	-	see footnote	\$ -	not contracted		not contracted		not contracted		not contracted		not contracted		\$ -
PARING OR CUTTING OF BENIGN HYPERKERATOTIC						see footnote												
11055 LESION (EG,	PRIMARY PROCEDURE OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION			\$	215.26	see footnote	\$ 215.26	not contracted	\$ 215.26	not contracted	\$ 215.26	not contracted	\$ 215.26	not contracted	\$ 215.26	not contracted	\$ 215.26	\$ 215.26
INJECTION(S); SINGLE OR MULTIPLE		99213		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
TRIGGER POINT(S), 3 20553 OR	PRIMARY PROCEDURE ULTRASONIC GUIDANCE FOR	20553		\$	313.18	see footnote	\$ 313.18	not contracted	\$ 313.18	not contracted	\$ 313.18	not contracted	\$ 313.18	not contracted	\$ 313.18	not contracted	\$ 313.18	\$ 313.18
	NEEDLE PLACEMENT (EG, BIOPSY, A	76942		\$	-	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
ESOPHAGEAL MOTILITY (MANOMETRIC STUD 91010 OF THE ESOPHAGUS		91010			505.43	see footnote	Ć 505.43		ć 505.42		6 505 42		Ć 505.42		Ć 505.42		Ć 505.42	6 505.43
INJECTION, MIDAZOLAM HYDROCHLORIDE, PE		91010		\$	585.12	see footnote	\$ 585.12	not contracted	\$ 585.12	not contracted	\$ 585.12	not contracted	\$ 585.12	not contracted	\$ 585.12	not contracted	\$ 585.12	\$ 585.12
J2250 1 MG	PRIMARY PROCEDURE	J2250		\$	-	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	INJECTION, FENTANYL CITRATE, 0.1 MG	J3010		\$	-	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
REMOVAL OF TUNNELED CENTRAL VENOUS CATHETER, 36589 WITHOUT SU	PRIMARY PROCEDURE	36589		\$	647.93	see footnote	\$ 647.93	not contracted	\$ 647.93	not contracted	\$ 647.93	not contracted	\$ 647.93	not contracted	\$ 647.93	not contracted	\$ 647.93	\$ 647.93
	REMOVAL OF TUNNELED INTRAPERITONEAL CATHETER	49422		\$ 3	,431.46	see footnote	\$ 3,431.46	not contracted	\$ 3,431.46	not contracted	\$ 3,431.46	not contracted	\$ 3,431.46	not contracted	\$ 3,431.46	not contracted	\$ 3,431.46	\$ 3,431.46
COLONOSCOPY, FLEXIBLE; WITH REMOVAL OF						see footnote			. ,		, ,							
45384 TUMOR(S), POLYP(PRIMARY PROCEDURE	45384		\$ 1	,243.02	****	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	not contracted	\$ 1,243.02	\$ 1,243.02

LAC+USC MEDICAL CENTER

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						ITHEM BLU edicare Adv			LINA Advantage)		LINA iConnect)		CARE iConnect)		CARE red CA)		PLINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facilit	ty**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		LEVEL IV - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EX	88305		\$	59.57	see footnote ****	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	not contracted	\$ 59.57	\$ 59.57
		INJECTION, MIDAZOLAM HYDROCHLORIDE, PER 1 MG	J2250		\$	-	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, FENTANYL CITRATE, 0.1 MG	J3010		\$	-	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
D2391	RESIN-BASED COMPOSITE - ONE SURFACE, POSTERIOR	PRIMARY PROCEDURE	D2391		\$	-	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		ORAL HYGIENE INSTRUCTION	D1330		Ś	_	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		LIMITED ORAL EVALUATION - PROBLEM FOCUSED	D0140		\$	-	see footnote	\$ -	not contracted		not contracted		not contracted	\$ -	not contracted		not contracted		\$ -
	ECHOCARDIOGRAPHY FETAL, CARDIOVASCULAR						see footnote												
76825	SYSTEM, REAL TI	PRIMARY PROCEDURE OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION	76825		\$	579.20	**** see footnote	\$ 579.20	not contracted	\$ 579.20	not contracted	\$ 579.20	not contracted	\$ 579.20	not contracted	\$ 579.20	not contracted	\$ 579.20	\$ 579.20
	HUMAN PAPILLOMAVIRUS	AND	99205		\$	-	***	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
90651	VACCINE TYPES 6, 11, 16, 18, 31, 3	PRIMARY PROCEDURE	90651		\$	-	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		IMMUNIZATION ADMINISTRATION (INCLUDES PERCUTANEOUS, INT	90471		\$	74.32	see footnote ****	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	not contracted	\$ 74.32	\$ 74.32
		OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND	99213		\$	-	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
2525	INTRODUCTION OF NEEDLE(S) AND/OR CATHETER(S),						see footnote												
36902	DIALYSIS	PRIMARY PROCEDURE UROGRAPHY, ANTEGRADE, RADIOLOGICAL SUPERVISION AND	36902		\$ 5,	941.14	see footnote	\$ 5,941.14	not contracted	\$ 5,941.14	not contracted	\$ 5,941.14	not contracted	\$ 5,941.14	not contracted	\$ 5,941.14	not contracted	\$ 5,941.14	\$ 5,941.14
		INTE	74425		\$	441.42	****	\$ 441.42	not contracted	\$ 441.42	not contracted	\$ 441.42	not contracted	\$ 441.42	not contracted	\$ 441.42	not contracted	\$ 441.42	\$ 441.42

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

		ce Category Service Description CPT Code Not				BLUE CROSS Advantage)		LINA Advantage)		LINA iConnect)		CARE iConnect)		CARE red CA)	MO (Cover		Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Facility**								
		INJECTION, MIDAZOLAM HYDROCHLORIDE, PER 1 MG	J2250		\$ -	see footnote	\$ -	not contracted	\$ -	\$ -								
		INJECTION, FENTANYL CITRATE, 0.1 MG	J3010		\$ -	see footnote	\$ -	not contracted	\$ -	\$ -								
67145	PROPHYLAXIS OF RETINAL DETACHMENT (EG, RETINAL BREAK, L	PRIMARY PROCEDURE	67145		\$ 603.26	see footnote	6 602.26		6 602.26		ć (02.26		ć co2.25		ć (03.26		6 602.26	\$ 603.26
67145	TYMPANOMETRY AND REFLEX THRESHOLD	PRIMARY PROCEDURE	6/145		\$ 603.26	see footnote	\$ 603.26	not contracted	\$ 603.26	\$ 603.26								
92550	MEASUREMENTS	PRIMARY PROCEDURE COMPREHENSIVE AUDIOMETRY THRESHOLD	92550		\$ 167.36	****	\$ 167.36	not contracted	\$ 167.36	\$ 167.36								
	ORAL EVALUATION	EVALUATION AND SPEEC	92557		\$ 167.36	see footnote ****	\$ 167.36	not contracted	\$ 167.36	\$ 167.36								
	FOR A PATIENT UNDER THREE YEARS OF AGE	PRIMARY PROCEDURE	D0145		\$ -	see footnote ****	\$ -	not contracted	\$ -	\$ -								
		CARIES RISK ASSESSMENT AND DOCUMENTATION,				see footnote												
		WITH A FINDIN PROPHYLAXIS-CHILD	D0603 D1120		\$ - \$ -	see footnote	\$ - \$ -	not contracted not contracted	\$ -	not contracted not contracted	•	not contracted not contracted		not contracted not contracted	\$ - \$ -	not contracted not contracted	•	\$ - \$ -
		TOPICAL FLUORIDE VARNISH; THERAPEUTIC			7	see footnote	<u> </u>	not contracted	-			not contracted	7	not contracted	7	not contracted	7	Ÿ
		APPLICATION FOR M ORAL HYGIENE	D1206		\$ -	see footnote	\$ -	not contracted	\$ -	\$ -								
	DESTRUCTION OF	INSTRUCTION	D1330		\$ -	****	\$ -	not contracted	\$ -	\$ -								
67210	LOCALIZED LESION OF RETINA (EG, MACULAR	PRIMARY PROCEDURE	67210		\$ 603.26	see footnote ****	\$ 603.26	not contracted	\$ 603.26	\$ 603.26								
		OPHTHALMOLOGICAL SERVICES: MEDICAL EXAMINATION AND				see footnote												
	LAPAROSCOPY, SURGICAL, WITH	EVAL	92014		\$ 142.43	****	\$ 142.43	not contracted	\$ 142.43	\$ 142.43								
58571	TOTAL HYSTERECTOMY, FOR UTE	PRIMARY PROCEDURE	58571		\$ 10,676.52	see footnote ****	\$ 10,676.52	not contracted	\$ 10,676.52	\$ 10,676.52								
		CYSTOURETHROSCOP Y (SEPARATE PROCEDURE)	52000		\$ 689.62	see footnote	\$ 689.62			not contracted		not contracted		not contracted		not contracted		

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

	Service Category Service Description CPT Code Not				M BLUE CROSS are Advantage)	_	LINA Advantage)	_	LINA liConnect)		CARE liConnect)		CARE red CA)		DLINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate	
Primary Code	Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		LEVEL V - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXA	88307		\$ 349	see footnote	\$ 349.12	not contracted	\$ 349.12	not contracted	\$ 349.12	not contracted	\$ 349.12	not contracted	\$ 349.12	not contracted	\$ 349.12	\$ 349.12
		INJECTION, CEFAZOLIN SODIUM, 500 MG	J0690		\$	see footnote	\$ -	not contracted		not contracted		not contracted		not contracted		not contracted		\$ -
		INJECTION, DEXAMETHASONE SODIUM PHOSPHATE, 1 MG	J1100		\$	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, HYDROMORPHONE, UP TO 4 MG INJECTION,	J1170		\$	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		MIDAZOLAM HYDROCHLORIDE, PER 1 MG	J2250		\$	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, ONDANSETRON HYDROCHLORIDE, PER 1 MG	J2405		Ś	see footnote	\$ -	not contracted	\$ -	not contracted	ς -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, PROPOFOL, 10 MG	J2704		\$	see footnote	\$ -	not contracted		not contracted		not contracted		not contracted		not contracted		\$ -
		INJECTION, NEOSTIGMINE METHYLSULFATE, UP TO 0.5 MG	J2710		\$	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, FENTANYL CITRATE, 0.1 MG	J3010		\$	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		GLYCOPYRROLATE, INHALATION SOLUTION, COMPOUNDED PRODUCT	J7642		Ś	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
E	VISUAL FIELD EXAMINATION, JNILATERAL OR BILATERAL, WITH	PRIMARY PROCEDURE			7	see footnote	\$ 66.72											\$ 66.72
II N S	RIDOTOMY/IRIDECTO MY BY LASER SURGERY (EG, FOR					see footnote	V 00.72		·									
C	GLAUCOMA CYSTOURETHROSCOP (, WITH INJECTION(S) FOR	PRIMARY PROCEDURE	66761		\$ 603	see footnote	- 003.20	not contracted	\$ 603.26	not contracted	\$ 603.26	not contracted	\$ 603.26	not contracted	\$ 603.26	not contracted	\$ 603.26	\$ 603.26
52287	CHEMODENERVATI	PRIMARY PROCEDURE	52287		\$ 2,146	.29	\$ 2,146.29	not contracted	\$ 2,146.29	not contracted	\$ 2,146.29	not contracted	\$ 2,146.29	not contracted	\$ 2,146.29	not contracted	\$ 2,146.29	\$ 2,146.29

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						BLUE CROSS Advantage)		LINA Advantage)		LINA iConnect)		CARE ediConnect)		CARE red CA)		LINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		HOSPITAL																
		OUTPATIENT CLINIC																
		VISIT FOR				6												
		ASSESSMENT AND MAN	G0463		\$ 142.43	see footnote	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	not contracted	\$ 142.43	\$ 142.43
		INJECTION,	00403		3 142.43		γ 142.43	not contracted	ý 142.43	not contracted	7 142.4	not contracted	ý 142.43	not contracted	ÿ 142.43	not contracted	3 142.43	3 142.43
		ONABOTULINUMTOXI				see footnote												
		NA, 1 UNIT	J0585		\$ 7.31	****	\$ 7.31	not contracted	\$ 7.31	not contracted	\$ 7.33	not contracted	\$ 7.31	not contracted	\$ 7.31	not contracted	\$ 7.31	\$ 7.31
		INJECTION,																
		LIDOCAINE HCL FOR																
		INTRAVENOUS	12004		_	see footnote					_				_		_	A
		INFUSION, 10 M	J2001		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	CATHETER																	
	PLACEMENT IN																	
	CORONARY ARTERY(S)					see footnote												
93460	FOR CORONARY A	PRIMARY PROCEDURE	93460		\$ 3,475.94	****	\$ 3,475.94	not contracted	\$ 3,475.94	not contracted	\$ 3,475.94	not contracted	\$ 3,475.94	not contracted	\$ 3,475.94	not contracted	\$ 3,475.94	\$ 3,475.94
		OFFICE OR OTHER																
		OUTPATIENT VISIT																
		FOR THE EVALUATION AND	99214		\$ -	see footnote	ć	not contracted	ė	not contracted	\$ -	not contracted	ė	not contracted	خ	not contracted	\$ -	\$ -
		BASIC METABOLIC	99214		٠ -		-	not contracted	÷ -	not contracted	ş -	not contracted	÷ -	not contracted	Ş -	not contracted	ş -	ş -
		PANEL (CALCIUM,																
		TOTAL) THIS PANEL				see footnote												
		MUST	80048		\$ 8.46	****	\$ 8.46	not contracted	\$ 8.46	not contracted	\$ 8.46	not contracted	\$ 8.46	not contracted	\$ 8.46	not contracted	\$ 8.46	\$ 8.46
		INJECTION, HEPARIN																
		SODIUM, PER 1000			_	see footnote												
		UNITS	J1644		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		INJECTION, MIDAZOLAM																
		HYDROCHLORIDE, PER				see footnote												
		1 MG	J2250		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
							•											
		INJECTION, FENTANYL				see footnote												
		CITRATE, 0.1 MG	J3010		\$ -	****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		BLOOD COUNT;																
		COMPLETE (CBC), AUTOMATED (HGB,				see footnote												
		HCT, RBC,	85027		\$ 6.47		\$ 6.47	not contracted	\$ 6.47	not contracted	\$ 6.47	7 not contracted	\$ 6.47	not contracted	\$ 6.47	not contracted	\$ 6.47	\$ 6.47
		- , -,			7	see footnote	*		*		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		7		· ·		*	
		PROTHROMBIN TIME;	85610		\$ 4.29		\$ 4.29	not contracted	\$ 4.29	not contracted	\$ 4.29	not contracted	\$ 4.29	not contracted	\$ 4.29	not contracted	\$ 4.29	\$ 4.29
		COLLECTION OF																
		VENOUS BLOOD BY			_	see footnote			.]				_			
	DEDAID OF COMPLEY	VENIPUNCTURE	36415		\$ 3.00	****	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	not contracted	\$ 3.00	\$ 3.00
	REPAIR OF COMPLEX RETINAL																	
	DETACHMENT (EG,					see footnote												
67113	PROLIFERATIVE	PRIMARY PROCEDURE	67113		\$ 4,694.32		\$ 4,694.32	not contracted	\$ 4,694.32	not contracted	\$ 4,694.32	not contracted	\$ 4,694.32	not contracted	\$ 4,694.32	not contracted	\$ 4,694.32	\$ 4,694.32
		VITRECTOMY,			,== ,==		, , , , , , , ,		, , , , , , , , , , , , , , , , , , ,		,		, , , , , , , , , , , , , , , , , , , ,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, , , ,	, , , , , , ,
		MECHANICAL, PARS																
		PLANA APPROACH;			l .	see footnote					1.				1.			
		WITH ENDOL	67040		\$ 4,694.32	****	\$ 4,694.32	not contracted	\$ 4,694.32	not contracted	\$ 4,694.32	not contracted	\$ 4,694.32	not contracted	\$ 4,694.32	not contracted	\$ 4,694.32	\$ 4,694.32

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

		Category Service Description CPT Code Not				BLUE CROSS Advantage)	_	LINA Advantage)	_	LINA iConnect)		CARE liConnect)		CARE red CA)	MOL (Cover		Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		INJECTION OF VITREOUS SUBSTITUTE, PARS PLANA OR LIMBAL	67025		\$ 2,489.25	see footnote		not contracted	\$ 2,489.25	not contracted	\$ 2,489.25	not contracted	\$ 2,489.25	not contracted	\$ 2,489.25	not contracted	\$ 2,489.25	\$ 2,489.25
		INTRAVITREAL INJECTION OF A PHARMACOLOGIC AGENT (SEPARA	67028		\$ 382.20	see footnote						not contracted				not contracted		
		INJECTION, MIDAZOLAM HYDROCHLORIDE, PER 1 MG	J2250		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		RINGERS LACTATE INFUSION, UP TO 1000 CC	J7120		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
	PREVENTIVE MEDICINE COUNSELING AND/OR					see footnote												
99401	RISK FACTOR REDUC	PRIMARY PROCEDURE MEDICAL GENETICS AND GENETIC COUNSELING			\$ -	see footnote	\$ -	not contracted		not contracted		not contracted		not contracted		not contracted		\$ -
	BRONCHOSCOPY, RIGID OR FLEXIBLE, INCLUDING	SERVICES, EACH	96040		\$ -	see footnote	7	not contracted		not contracted		not contracted		not contracted		not contracted		\$ -
31624	FLUOROSCOPIC	PRIMARY PROCEDURE INFECTIOUS AGENT ANTIGEN DETECTION BY	31624		\$ 1,793.41		\$ 1,793.41	not contracted	\$ 1,793.41	not contracted	\$ 1,793.41	not contracted	\$ 1,793.41	not contracted	\$ 1,793.41	not contracted	\$ 1,793.41	\$ 1,793.41
		IMMUNOFLUORESCE NT	87281		\$ 11.98	see footnote	\$ 11.98	not contracted	\$ 11.98	not contracted	\$ 11.98	not contracted	\$ 11.98	not contracted	\$ 11.98	not contracted	\$ 11.98	\$ 11.98
		INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY TECHN	87305		\$ 11.98	see footnote ****	\$ 11.98	not contracted	\$ 11.98	not contracted	\$ 11.98	not contracted	\$ 11.98	not contracted	\$ 11.98	not contracted	\$ 11.98	\$ 11.98
		CULTURE, TUBERCLE OR OTHER ACID-FAST BACILLI (EG, TB, A	87116		\$ 10.80	see footnote	\$ 10.80	not contracted	\$ 10.80	not contracted	\$ 10.80	not contracted	\$ 10.80	not contracted	\$ 10.80	not contracted	\$ 10.80	\$ 10.80
		CULTURE, FUNGI (MOLD OR YEAST) ISOLATION, WITH PRESUMPT	87102		\$ 8.41	see footnote	\$ 8.41	not contracted	\$ 8.41	not contracted	\$ 8.41	not contracted	\$ 8.41	not contracted	\$ 8.41	not contracted	\$ 8.41	\$ 8.41
		INJECTION, MIDAZOLAM HYDROCHLORIDE, PER 1 MG	J2250		\$ -	see footnote	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

						ANTHEM BI			LINA Advantage)		LINA liConnect)		CARE diConnect)		CARE red CA)		DLINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CDT Code	Note	F-0	cility**	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
Code	Service Category	Service Description	CFI Code	Note	га	Cility	Professional	racility	Professional	racility	Professional	racility	Professional	racility	Professional	Facility	Professional	racility	Facility
		INJECTION, FENTANYL CITRATE, 0.1 MG	J3010		\$	-	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		CONCENTRATION (ANY TYPE), FOR INFECTIOUS AGENTS	87015		\$	6.68	see footnote ****	\$ 6.68	not contracted	\$ 6.68	not contracted	\$ 6.68	not contracted	\$ 6.68	not contracted	\$ 6.68	not contracted	\$ 6.68	\$ 6.68
		SMEAR, PRIMARY SOURCE WITH INTERPRETATION; FLUORESCENT	87206		\$	5.39	see footnote ****	\$ 5.39	not contracted	\$ 5.39	not contracted	\$ 5.39	not contracted	\$ 5.39	not contracted	\$ 5.39	not contracted	\$ 5.39	\$ 5.39
		CULTURE, BACTERIAL; ANY OTHER SOURCE EXCEPT URINE, BLOO	87070		Ś	8.62	see footnote ****	\$ 8.62	not contracted	\$ 8.62	not contracted	\$ 8.62	not contracted	\$ 8.62	not contracted	\$ 8.62	not contracted	\$ 8.62	\$ 8.62
		SMEAR, PRIMARY SOURCE WITH INTERPRETATION; GRAM OR GIEM	87205		\$	4.27	see footnote ****	\$ 4.27										,	
		CELL COUNT, MISCELLANEOUS BODY FLUIDS (EG, CEREBROSPINA	89050		\$	4.72	see footnote	\$ 4.72	not contracted	\$ 4.72	not contracted	\$ 4.72	not contracted	\$ 4.72	not contracted	\$ 4.72	not contracted	\$ 4.72	\$ 4.72
20680	REMOVAL OF IMPLANT; DEEP (EG, BURIED WIRE, PIN, SCREW,	PRIMARY PROCEDURE	20680		Ś	2,842.17	see footnote	\$ 2,842.17	not contracted	\$ 2,842.17	not contracted	\$ 2,842.17	not contracted	\$ 2,842.17	not contracted	\$ 2,842.17	not contracted	\$ 2,842.17	\$ 2,842.17
		OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND	99213		Ś		see footnote	\$ -	not contracted		not contracted		not contracted		not contracted		not contracted		\$ -
20206	BIOPSY, MUSCLE, PERCUTANEOUS NEEDLE	PRIMARY PROCEDURE	20206		\$	1,686.60	see footnote	\$ 1,686.60			not contracted								
		COMPUTED TOMOGRAPHY GUIDANCE FOR NEEDLE PLACEMENT (EG,	77012		\$	-	see footnote ****	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	not contracted	\$ -	\$ -
		COMPUTED TOMOGRAPHY, PELVIS; WITH CONTRAST MATERIAL(S)	72193		Ś	214.12	see footnote	\$ 214.12	not contracted	\$ 214.12	not contracted	\$ 214.12	not contracted	\$ 214.12	not contracted	\$ 214.12	not contracted	\$ 214.12	\$ 214.12
		IMMUNOHISTOCHEMI STRY OR IMMUNOCYTOCHEMI STRY, PER SPECIM	88341		\$	-	see footnote	\$ 214.12	not contracted		not contracted		not contracted		not contracted		not contracted		\$ -

MEDICARE PAYOR CONTRACTS - COMPREHENSIVE OUTPATIENT SERVICES BY PROCEDURE*

EFFECTIVE JANUARY 1, 2023 UPDATED AS OF 12/15/2022

							UE CROSS dvantage)		LINA Advantage)		LINA liConnect)		. CARE diConnect)		CARE ered CA)		LINA red CA)	Maximum Negotiated Rate	Minimum Negotiated Rate
Primary Code	Service Category	Service Description	CPT Code	Note	Facility*	*	Professional	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Professional***	Facility**	Facility**
		LEVEL IV - SURGICAL PATHOLOGY, GROSS	2225				see footnote	A 50.57		4 5057				.		A 50.57		. 50.57	4 50.57
		AND MICROSCOPIC EX IMMUNOHISTOCHEMI STRY OR IMMUNOCYTOCHEMI STRY, PER SPECIM				78.78	see footnote	\$ 59.57 \$ 178.78	not contracted		not contracted						not contracted		\$ 59.57 \$ 178.78
		INJECTION, MIDAZOLAM HYDROCHLORIDE, PER 1 MG			\$ 17	6.76	see footnote	\$ 176.76	not contracted		not contracted		not contracted		not contracted		not contracted		\$ 176.76 \$ -
		INJECTION, FENTANYL CITRATE, 0.1 MG			\$	-	see footnote	\$ -	not contracted		not contracted		not contracted		not contracted		not contracted		\$ -
55866	SURGICAL REMOVAL OF PROSTATE AND SURROUNDING LYMPH NODES USING AN ENDOSCOPE			This procedure was provided in inpatient setting only		n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	ROUTINE OBSTETRIC CARE FOR CESAREAN DELIVERY, INCLUDING PRE-AND POST- DELIVERY CARE			This procedure was provided in inpatient setting only		n/a	n/a	n/a	n/a	n/a	n/a	n/a	a n/a	n/a	n/a	n/a	n/a	n/a	n/a
	ROUTINE OBSTETRIC CARE FOR VAGINAL DELIVERY AFTER PRIOR CESAREAN DELIVERY INCLUDING PRE-AND POST-			This procedure was provided in inpatient					,										
	DELIVERY CARE OBSTETRIC BLOOD TEST PANEL			setting only Not offered		n/a n/a	n/a n/a	n/a n/a	n/a n/a	n/a n/a	·			n/a n/a		n/a n/a	n/a n/a	·	n/a n/a

Footnotes:

^{*} Outpatient services presented are commonly provided by Health Services hospitals, excluding services which are not considered "shoppable".

^{**} Facility Rates are calculated based on the contract terms, using 100% FY 2021-2022 Wage Index for LA County CBSA code 31084, Addendum B.-Final OPPS Payment by HCPCS Code for CY 2022 published on October 18, 2022 and 2022 Medicare 4th Quarter Clinical Laboratory fee schedule as applicable.

^{***} Professional services are not contracted.

^{****} Professional services can be found in schedule "Consumer Shoppable Services_LAC+USC Medical Center_Medicare and Commercial Payor Contracts - Shoppable Outpatient Professional Services By Procedure for Anthem Blue Cross".